

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 USACTION		3. FEC Identification Number C C90012089
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1825 K ST. NW SUITE 210		
(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
 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
11	/	02	/	2010

THROUGH

M M	/	D D	/	Y Y Y Y
12	/	31	/	2010

6. TOTAL CONTRIBUTIONS 0.00

7. TOTAL INDEPENDENT EXPENDITURES 65397.82

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
Eboni Speight	<i>Eboni Speight</i>	01/30/2012

[Electronically Filed]

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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Amazon		Date MM / DD / YYYY 11 / 24 / 2010
Mailing Address		Amount 501.93 Transaction ID : F57.4342
City	State Zip Code	
Purpose of Expenditure iPod Accessories for Canvass	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 65706.80		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Amtrak		Date MM / DD / YYYY 11 / 24 / 2010
Mailing Address		Amount 311.00 Transaction ID : F57.4343
City	State Zip Code	
Purpose of Expenditure Field Travel	Category/Type 002	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 24699.68		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Apple		Date MM / DD / YYYY 11 / 24 / 2010
Mailing Address		Amount 5994.00 Transaction ID : F57.4344
City	State Zip Code	
Purpose of Expenditure iPods for Canvassers	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 71700.80		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	6806.93
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Samuel Balikov		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 304 Evergreen Dr.		Amount 50.00 Transaction ID : F57.4367
City Moorestown	State NJ	
Zip Code 08057		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 16316.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Kaitlin Bangert		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 110 South Ambler St.		Amount 245.00 Transaction ID : F57.4309
City Quakertown	State PA	
Zip Code 18951		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 13176.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee William Barker		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 50 Hawthorne Lane		Amount 360.00 Transaction ID : F57.4384
City Levittown	State PA	
Zip Code 19055		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 18863.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	655.00
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Trisha Barnes-Wilson		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 210 Marision Rd.		Amount 219.48 Transaction ID : F57.4377
City Dunbarton	State NH	
Zip Code 03046	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 17959.32		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Brenda Barron		Date MM / DD / YYYY 11 / 23 / 2010
Mailing Address 1825 K St. NW Suite 210		Amount 1527.22 Transaction ID : F57.4263
City Washington	State DC	
Zip Code 20006	Purpose of Expenditure Reimbursements for travel, gas, food and cell phone usage	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 23389.95		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee James Bennett		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 1 Magnolia Park Lane		Amount 150.00 Transaction ID : F57.4300
City Levittown	State PA	
Zip Code 19054	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 12446.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1896.70
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Hugh Birchall		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 5929 Emilie Rd.		Amount 500.00 Transaction ID : F57.4298
City Levittown	State PA	
Zip Code 19056		
Purpose of Expenditure Canvasser payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 12296.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Jeff Blum		Date MM / DD / YYYY 11 / 09 / 2010
Mailing Address 1825 K St. NW Suite 210		Amount 52.25 Transaction ID : F57.4270
City Washington	State DC	
Zip Code 20006		
Purpose of Expenditure Travel Reimbursement	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 20738.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Jeff Blum		Date MM / DD / YYYY 11 / 09 / 2010
Mailing Address 1825 K St. NW Suite 210		Amount 1022.25 Transaction ID : F57.4271
City Washington	State DC	
Zip Code 20006		
Purpose of Expenditure Travel Reimbursement	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 61657.12		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1574.50
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Bethanne Boggs		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 40 Sunrise Ct.		Amount 100.00 Transaction ID : F57.4261
City Holland	State PA	
Zip Code 18966	Purpose of Expenditure Canvasser Payment	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 8690.28		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Vincent Bradley		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 90 East Boradway, Apt 2		Amount 1170.81 Transaction ID : F57.4381
City Dery	State NH	
Zip Code 03038	Purpose of Expenditure Canvasser Payment	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 59196.74		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Antonio Brailey		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 32 Ivy Hill Rd.		Amount 200.00 Transaction ID : F57.4254
City Levittown	State PA	
Zip Code 19057	Purpose of Expenditure Canvasser Payment	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 8440.28		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1470.81
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Holly Brennan		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 53 Parkside Circle		Amount 100.00 Transaction ID : F57.4296
City Levittown	State PA	
Zip Code 19056	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 11346.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Michael Brennan		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 506 Nel Drive		Amount 450.00 Transaction ID : F57.4333
City Fairless Hills	State PA	
Zip Code 19030	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 15716.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Suraj Budathoki		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 394 Rimaron St.		Amount 518.61 Transaction ID : F57.4375
City Manchester	State NH	
Zip Code 03102	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 58025.93		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1068.61
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Elizabeth Burdette		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 82 Nightingale Lane		Amount 200.00 Transaction ID : F57.4287
City Levittown	State PA	
Zip Code 19054	Purpose of Expenditure canvasser payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 11246.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Andrew Butler		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address PO Box 11727		Amount 132.50 Transaction ID : F57.4250
City Philadelphia	State PA	
Zip Code 19101	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 8090.28		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Andrew Capen		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 22 Douglas Drive		Amount 92.54 Transaction ID : F57.4252
City Amherst	State NH	
Zip Code 03031	Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 30731.23		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	425.04
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Melissa Chauvette		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 180 Alsace St. #3		Amount 616.26 Transaction ID : F57.4331
City Manchester	State NH	
Zip Code 03102	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Purpose of Expenditure Canvasser Payment		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 50698.68		

Full Name (Last, First, Middle Initial) of Payee Kalan Cleary		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 210 Manison R.d		Amount 195.00 Transaction ID : F57.4310
City Dunbarton	State NH	
Zip Code 03046	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Purpose of Expenditure Canvasser Payment		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 46800.64		

Full Name (Last, First, Middle Initial) of Payee Stacy Collier		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 112 W. Bridge St #11		Amount 50.00 Transaction ID : F57.4370
City Morrisville	State PA	
Zip Code 19067	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Purpose of Expenditure Canvasser Payment		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 16416.82		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	861.26
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Brad Collins		Date MM / DD / YYYY 11 / 08 / 2010
Mailing Address 66 Teal Drive		Amount 540.00 Transaction ID : F57.4262
City Langhorne	State PA	
Zip Code 19047	Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 20443.76		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Daniel Conroy		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 32 Ivy Hill Rd.		Amount 300.00 Transaction ID : F57.4280
City Levittown	State PA	
Zip Code 19057	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 9999.32		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Continental		Date MM / DD / YYYY 11 / 24 / 2010
Mailing Address		Amount 338.80 Transaction ID : F57.4346
City	State	
Zip Code	Purpose of Expenditure Field Travel	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 72039.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1178.80
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Asa Costley-Bupp		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 135 Winchester St.		Amount 1020.00 Transaction ID : F57.4255
City Newton Highlands	State MA	
Zip Code 02461	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 31751.23		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Roosevelt Cox		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 358 Winding Pond Rd.		Amount 2.71 Transaction ID : F57.4365
City Londonder	State NH	
Zip Code 03053	Purpose of Expenditure Mileage Reimbursement	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 54838.01		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Craigslist		Date MM / DD / YYYY 11 / 24 / 2010
Mailing Address		Amount 25.00 Transaction ID : F57.4347
City	State	
Zip Code	Purpose of Expenditure Recruitment Ads for Canvassers	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 25961.22		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1047.71
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Michelle Craver		Date MM / DD / YYYY 11 / 09 / 2010
Mailing Address 5102 Kansas Ave., NW		Amount 191.52 Transaction ID : F57.4336
City Washington	State DC	
Zip Code 20011	Purpose of Expenditure Travel Reimbursement	Category/Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 21591.43		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Benjamin Dalzell		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 139 Briar Hill Rd.		Amount 84.50 Transaction ID : F57.4260
City Hopkinton	State NH	
Zip Code 03229	Purpose of Expenditure Canvasser Payment	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 32802.79		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Jeff Dalzell		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 139 Briar Hill Rd		Amount 861.21 Transaction ID : F57.4304
City Hopkinton	State NH	
Zip Code 03229	Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 45465.69		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1137.23
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Shaminga Davis		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 937 W. Trenton Ave. Apt. B3		Amount 50.00 Transaction ID : F57.4369
City Morrsville	State PA	
Zip Code 19067	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 16366.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Douglas Desrochers		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 185 Taylor St. #1		Amount 78.00 Transaction ID : F57.4283
City Manchester	State NH	
Zip Code 03103	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 37600.33		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Luis Dorta		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 12 Ring Lane		Amount 550.00 Transaction ID : F57.4322
City Levittown	State PA	
Zip Code 19055	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 14616.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	678.00
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Leslie Durkee		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 32 Ivey Hill Rd.		Amount 400.00 Transaction ID : F57.4320
City Levittown	State PA	
Zip Code 19057	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 14066.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Alison Eberle		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 126 E. Maple Ave Apt. B5		Amount 150.00 Transaction ID : F57.4249
City Morrisville	State PA	
Zip Code 19067	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 7957.78		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Expedia		Date MM / DD / YYYY 11 / 24 / 2010
Mailing Address		Amount 1377.28 Transaction ID : F57.4348
City	State	
Zip Code	Purpose of Expenditure Field Travel	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 27338.50		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1927.28
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Expedia		Date MM / DD / YYYY 11 / 24 / 2010
Mailing Address		Amount 1208.20 Transaction ID : F57.4349
City	State Zip Code	
Purpose of Expenditure Field Travel	Category/Type 002	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 73247.80		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Facebook		Date MM / DD / YYYY 11 / 24 / 2010
Mailing Address		Amount 214.00 Transaction ID : F57.4350
City	State Zip Code	
Purpose of Expenditure Recruitment Ads for Canvasser	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 73461.80		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Kirsten Feyling		Date MM / DD / YYYY 11 / 09 / 2010
Mailing Address 1825 K St. NW Suite 210		Amount 103.25 Transaction ID : F57.4315
City	State Zip Code	
Purpose of Expenditure Travel Reimbursement	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 20842.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1525.45
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Dudd Kirk Flanagan		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 5929 Emilie Rd.		Amount 250.00 Transaction ID : F57.4286
City Levittown	State PA	
Zip Code 19057		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 11046.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jasmine Franchitti		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 6016 Falmont Dr.		Amount 50.00 Transaction ID : F57.4302
City Morrisville	State PA	
Zip Code 19067		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 12496.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Granite State Progress		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 4 Park St.		Amount 2000.00 Transaction ID : F57.4294
City Concord	State NH	
Zip Code 03301		
Purpose of Expenditure Salary for Canvass Directory	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 42730.57		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	2300.00
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Wendy Greenleaf		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address PO Box 183		Amount 91.92 Transaction ID : F57.4383
City Nottingham	State NH	
Zip Code 03290	Purpose of Expenditure Canvasser Payment	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 59288.66		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Frances Haas		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 48 Stratham Hgts. Rd.		Amount 441.32 Transaction ID : F57.4290
City Stratham	State NH	
Zip Code 03885	Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 38686.07		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Cody Harke-Weliky		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 43 Oakview Ter. Apt. 1		Amount 240.50 Transaction ID : F57.4276
City Boston	State MA	
Zip Code 02130	Purpose of Expenditure Canvasser Payment	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 37522.33		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	773.74
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Melissa Harley		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 506 Nel Dr.		Amount 350.00 Transaction ID : F57.4332
City Fairless Hills	State PA	
Zip Code 19030	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 15266.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Jonathan Harrigan		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 61 Mistletoe Lane		Amount 150.00 Transaction ID : F57.4305
City Levittown	State PA	
Zip Code 19054	Purpose of Expenditure canvasser payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 12846.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Alexis Hawkins		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 26 Bridle Path		Amount 1166.25 Transaction ID : F57.4248
City Shrewsburg	State MA	
Zip Code 01545	Purpose of Expenditure Canvasser payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1166.25		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1666.25
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Joseph Herman		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 347 Washington St.		Amount 85.00 Transaction ID : F57.4307
City Bristol	State PA	
Zip Code 19007		
Purpose of Expenditure canvasser payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 12931.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Lauren Hoffman		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 1191 gorham Pond Rd.		Amount 288.49 Transaction ID : F57.4319
City Dunbarton	State NH	
Zip Code 03046		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 48099.51		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Lisa Hough-Kovacs		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address PO Box 305		Amount 479.35 Transaction ID : F57.4321
City Contoocoo	State NH	
Zip Code 03229		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 48578.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	852.84
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Ayla Jordan		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 20 Hosley St.		Amount 602.73 Transaction ID : F57.4257
City Manchester	State NH	
Zip Code 03103		
Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 32718.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Chelsea Karacz		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 1105 Central Ave		Amount 450.00 Transaction ID : F57.4272
City Feasterville	State PA	
Zip Code 19053		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 9490.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Alexey Karavitchev		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 1570 Hummingbird Ct.		Amount 50.00 Transaction ID : F57.4247
City Yardley	State PA	
Zip Code 19067		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 7807.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1102.73
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Anna Kavanagh		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 51 Neptune Lne.		Amount 150.00 Transaction ID : F57.4387
City Levittown	State PA	
Zip Code 19054	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 19013.25		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Deborah Kavanagh		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 51 Neptune Lane		Amount 300.00 Transaction ID : F57.4285
City Levittown	State PA	
Zip Code 19054	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 10796.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Christina Keane		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 393 Laurel St. #1		Amount 510.54 Transaction ID : F57.4274
City Manchester	State NH	
Zip Code 03103	Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 37039.28		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	960.54
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Andrea Knoblock		Date MM / DD / YYYY 11 / 08 / 2010
Mailing Address 82 Nightingale Ln.		Amount 350.00 Transaction ID : F57.4251
City Levittonw	State PA	
Zip Code 19054	Purpose of Expenditure Canvasser Payment	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 19377.55		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Richard Komi		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 493 Spruce St.		Amount 2.86 Transaction ID : F57.4359
City Manchester	State NH	
Zip Code 03103	Purpose of Expenditure Mileage Reimbursement	Category/Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 53000.05		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Brittany Larson		Date MM / DD / YYYY 11 / 06 / 2010
Mailing Address 1825 K St. NW Suite 210		Amount 14.30 Transaction ID : F57.4264
City Washington	State DC	
Zip Code 20006	Purpose of Expenditure Travel Reimbursement	Category/Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 19027.55		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	367.16
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Gary Dean Ledbetter		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 1564 Hookset Rd. #106		Amount 350.51 Transaction ID : F57.4292
City Hookset	State NH	
Zip Code 03106	Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01
Category/Type 001	Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 39741.03	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cendric Lefungula		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 64 Huntington Ave.		Amount 507.65 Transaction ID : F57.4268
City Manchester	State NH	
Zip Code 03109	Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01
Category/Type 001	Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 35904.74	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mary Luckers		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 27 Kings Court		Amount 294.81 Transaction ID : F57.4328
City Manchester	State NH	
Zip Code 03103	Purpose of Expenditure Canvasser Payment	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01
Category/Type 001	Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 50082.42	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1152.97
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Kayla Mailhot		Date MM / DD / YYYY 11 / 09 / 2010
Mailing Address 126 Mooseclub Park Rd		Amount 32.50 Transaction ID : F57.4312
City Goffstown	State NH	
Zip Code 03045		
Purpose of Expenditure canvasser payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 61689.62		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Laura Mansnerus		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 2411 Waverly St.		Amount 300.00 Transaction ID : F57.4318
City Philadelphia	State PA	
Zip Code 19146		
Purpose of Expenditure Canvasser payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 13666.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Erin Lee Marcello		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 925 Hayward St.		Amount 104.00 Transaction ID : F57.4288
City Manchester	State NH	
Zip Code 03103		
Purpose of Expenditure canvasser payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 37704.33		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	436.50
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Michael Marinello		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 12 Ring Lane		Amount 100.00 Transaction ID : F57.4334
City Levittown	State PA	
Zip Code 19055	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 15816.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Ashley Marshall		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 189 Central St.		Amount 364.33 Transaction ID : F57.4256
City Manchester	State NH	
Zip Code 03103	Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 32115.56		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Crystal Martzall		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address PO Box 384		Amount 89.04 Transaction ID : F57.4279
City Reamstown	State PA	
Zip Code 17567	Purpose of Expenditure Canvasser food and reimbursment for cell phone usage	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 9699.32		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	553.37
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Jason Maxwell		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 204 Trenton Rd.		Amount 200.00 Transaction ID : F57.4303
City Fairless Hills	State PA	
Zip Code 19030	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Purpose of Expenditure Canvasser Payment		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 12696.82		

Full Name (Last, First, Middle Initial) of Payee Robert Mickle		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 2 Mountain Ash Lane, Apt. 212		Amount 1191.75 Transaction ID : F57.4363
City Goffstonw	State NH	
Zip Code 03045	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Purpose of Expenditure Canvasser Payment		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 54191.80		

Full Name (Last, First, Middle Initial) of Payee Gita Mishra		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 478 Notre Dame Ave.		Amount 989.54 Transaction ID : F57.4293
City Manchester	State NH	
Zip Code 03102	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Purpose of Expenditure Canvasser Payment and Mileage Reimbursement		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 40730.57		

(a) SUBTOTAL of Itemized Independent Expenditures.....	2381.29
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Monster		Date MM / DD / YYYY 11 / 24 / 2010
Mailing Address		Amount 99.00 Transaction ID : F57.4351
City	State Zip Code	
Purpose of Expenditure Recruitment Ads for Canvassers	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 73560.80		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Ronald Moody		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 140 Central St.		Amount 643.50 Transaction ID : F57.4364
City	State Zip Code Manchester NH 03103	
Purpose of Expenditure Canvasser Payment	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 54835.30		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee New Hampshire Citizens Alliance forAction		Date MM / DD / YYYY 11 / 17 / 2010
Mailing Address 4 Park Street Suite 304		Amount 3000.00 Transaction ID : F57.4340
City	State Zip Code Concord NH 03301	
Purpose of Expenditure Payment for Canvass Organization and work	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 65058.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	3742.50
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Barry Norman		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 32 Ivy Hill Rd.		Amount 150.00 Transaction ID : F57.4259
City Levittown	State PA	
Zip Code 19057	Purpose of Expenditure Canvasser Payment	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 8590.28		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Priscilla Nyemah		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 130 Middle St. Apt 4		Amount 429.00 Transaction ID : F57.4354
City Manchester	State NH	
Zip Code 03101	Purpose of Expenditure Canvasser Payment	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 52667.84		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Christian Orellana		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 323 Lowell St.		Amount 624.00 Transaction ID : F57.4273
City Manchester	State NH	
Zip Code 03104	Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 36528.74		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1203.00
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Lynsay Ouimette		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 104 Bluestone Dr.		Amount 243.75 Transaction ID : F57.4323
City Nashua	State NH	
Zip Code 03062		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 48822.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Neil Payne		Date MM / DD / YYYY 11 / 23 / 2010
Mailing Address 1601 Argonne Place NW Apt 232		Amount 506.14 Transaction ID : F57.4339
City Washington	State DC	
Zip Code 20009		
Purpose of Expenditure Travel Reimbursement	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 24029.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Richard Pierson		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 32 Ivy Hill Rd.		Amount 50.00 Transaction ID : F57.4360
City Levittown	State PA	
Zip Code 19057		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 16016.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	799.89
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Kathleen Prescod		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 185 Kenwood Dr. N		Amount 190.00 Transaction ID : F57.4311
City Levittown	State PA	
Zip Code 19055	Purpose of Expenditure canvasser payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 13366.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee PR Newswire		Date MM / DD / YYYY 11 / 09 / 2010
Mailing Address G.P.O. Box 5897		Amount 260.00 Transaction ID : F57.4353
City New York	State NY	
Zip Code 10087-5897	Purpose of Expenditure Canvass Advertising	Category/ Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 61949.62		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Mark Provos		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 217 Cameron St.		Amount 965.00 Transaction ID : F57.4325
City Manchester	State NH	
Zip Code 03103	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 49787.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1415.00
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee QMS		Date MM / DD / YYYY 11 / 10 / 2010
Mailing Address 4829 Fairmont Ave Suite B		Amount 21.87 Transaction ID : F57.4355
City Bethesda	State MD	
Zip Code 20814		
Purpose of Expenditure Courier Service for Canvass	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 62058.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee QMS		Date MM / DD / YYYY 11 / 10 / 2010
Mailing Address 4829 Fairmont Ave Suite B		Amount 79.01 Transaction ID : F57.4356
City Bethesda	State MD	
Zip Code 20814		
Purpose of Expenditure courier service for Canvass	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 21812.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Christine Reuschel		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 116 S. Taylor St.		Amount 242.55 Transaction ID : F57.4275
City Manchester	State NH	
Zip Code 03103		
Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 37281.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	343.43
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Adam Reynolds-Reuschel		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 116 S. Taylor St.		Amount 182.80 Transaction ID : F57.4245
City Manchester	State NH	
Zip Code 03103	Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 29322.55		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Zandra Rice-Hawkins		Date MM / DD / YYYY 11 / 03 / 2010
Mailing Address 85 Danis Park Road		Amount 543.01 Transaction ID : F57.4385
City Goffstown	State NH	
Zip Code 03045	Purpose of Expenditure Canvass food and travel reimbursement	Category/Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 59831.67		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Matthew Rivera		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 32 Ivy Hill Rd.		Amount 300.00 Transaction ID : F57.4329
City Levittown	State PA	
Zip Code 19057	Purpose of Expenditure Canvasser Payment	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 14916.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1025.81
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Marti Rosenberg		Date MM / DD / YYYY 11 / 09 / 2010
Mailing Address 31 Talbot Manor		Amount 473.81 Transaction ID : F57.4326
City Cranston	State RI	
Zip Code 02905		
Purpose of Expenditure travel reimbursement	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 21399.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Carolyn Roush		Date MM / DD / YYYY 11 / 09 / 2010
Mailing Address 1825 K St. NW Suite 210		Amount 242.84 Transaction ID : F57.4267
City Washington	State DC	
Zip Code 20006		
Purpose of Expenditure Travel Reimbursement	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 20686.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Ngirabukuni Ruhuara		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 143 Orange St.		Amount 535.91 Transaction ID : F57.4341
City Manchester	State NH	
Zip Code 03104		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 52238.84		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1252.56
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Kelsey Russell		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 83 Wheeler Rd.		Amount 389.63 Transaction ID : F57.4313
City Hollis	State NH	
Zip Code 03049	Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01
Calendar Year-To-Date Per Election for Office Sought 47190.27		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee F. Noel Sagna		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 3 Molly Stark Ln.		Amount 540.42 Transaction ID : F57.4289
City New Boston	State NH	
Zip Code 03070	Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01
Calendar Year-To-Date Per Election for Office Sought 38244.75		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Heyward Samuel Jr.		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 23 Dianna Rd.		Amount 999.66 Transaction ID : F57.4295
City Londonder	State NH	
Zip Code 03053	Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01
Calendar Year-To-Date Per Election for Office Sought 43730.23		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1929.71
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Moses Sawyer		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 13a Orange St. #3		Amount 422.50 Transaction ID : F57.4337
City Manchester	State NH	
Zip Code 03104	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 51121.18		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Carin Schiewe		Date MM / DD / YYYY 11 / 09 / 2010
Mailing Address 1 Weeks Ave		Amount 253.20 Transaction ID : F57.4266
City Roslindale	State MA	
Zip Code 02131	Purpose of Expenditure Mileage Reimbursement	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 60634.87		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Courtney Schodowski		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 1503 A Edgely Rd.		Amount 50.00 Transaction ID : F57.4278
City Levittown	State PA	
Zip Code 19057	Purpose of Expenditure Canvasser payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 9610.28		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	725.70
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Kristina Schultz		Date MM / DD / YYYY 11 / 08 / 2010
Mailing Address 804 Alton Woods Dr		Amount 550.00 Transaction ID : F57.4317
City Concord	State NH	
Zip Code 03301	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Purpose of Expenditure Canvass Director Salary - 1 week		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 60381.67		

Full Name (Last, First, Middle Initial) of Payee G. Silvia Sironich-Kalkan		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 10 Tether Rd.		Amount 704.45 Transaction ID : F57.4291
City Bedford	State NH	
Zip Code 03110	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Purpose of Expenditure Canvasser Payment and Mileage Reimbursement		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 39390.52		

Full Name (Last, First, Middle Initial) of Payee David Solender		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address PO Box 10415		Amount 97.50 Transaction ID : F57.4281
City Bedford	State NH	
Zip Code 03110	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Purpose of Expenditure Canvasser Payment		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 10096.82		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1351.95
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Staples		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address Dept.51 - 7872191902 Staples Credit Plan		Amount 2669.31 Transaction ID : F57.4371
City Des Moines	State IA	
Purpose of Expenditure Canvass Supplies for NH	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 57507.32		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Staples		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address Dept.51 - 7872191902 Staples Credit Plan		Amount 1023.02 Transaction ID : F57.4372
City Des Moines	State IA	
Purpose of Expenditure Canvass Supplies for PA	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 17439.84		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Matthew Stetson		Date MM / DD / YYYY 11 / 15 / 2010
Mailing Address 854 N 22nd St. #3		Amount 50.00 Transaction ID : F57.4330
City Philadelphia	State PA	
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 21862.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	3742.33
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Steve Stidham		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 7 Library Way		Amount 300.00 Transaction ID : F57.4373
City Levittown	State PA	
Zip Code 19055	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Purpose of Expenditure Canvasser Payment		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 17739.84		

Full Name (Last, First, Middle Initial) of Payee Marc Stier		Date MM / DD / YYYY 11 / 23 / 2010
Mailing Address 6714 Wissahickon Avenue		Amount 133.00 Transaction ID : F57.4324
City Philadelphia	State PA	
Zip Code 19119	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Purpose of Expenditure Travel Reimbursement		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 23522.95		

Full Name (Last, First, Middle Initial) of Payee Wallace Tabron		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 12 Ring Lane		Amount 250.00 Transaction ID : F57.4382
City Levittown	State PA	
Zip Code 19055	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Purpose of Expenditure Canvasser Payment		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 18503.25		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	683.00
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Huzan Taha		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 90 Trahan St. #90		Amount 471.25 Transaction ID : F57.4299
City Manchester	State NH	
Zip Code 03103	Purpose of Expenditure Canasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 44201.48		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Jouan Taha		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 90 Trahan St. #90		Amount 600.45 Transaction ID : F57.4308
City Manchester	State NH	
Zip Code 03103	Purpose of Expenditure Canvasser Payment and Mileage Reimbursement	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 46605.64		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Raymond Torres		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 144 W. Durham St.		Amount 150.00 Transaction ID : F57.4358
City Philadelphia	State PA	
Zip Code 19119	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 15966.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1221.70
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Trucksmart		Date MM / DD / YYYY 11 / 24 / 2010
Mailing Address 127 Lincoln Hwy		Amount 1236.54 Transaction ID : F57.4345
City Fairless Hills	State PA	
Zip Code 19030	Purpose of Expenditure Vans for PA Canvass	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 25936.22		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee UPS		Date MM / DD / YYYY 11 / 23 / 2010
Mailing Address PO BOX 7247-0244		Amount 359.59 Transaction ID : F57.4378
City Philadelphia	State PA	
Zip Code 19170-0001	Purpose of Expenditure Overnight deliveries to PA Canvass	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 24388.68		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee UPS		Date MM / DD / YYYY 11 / 23 / 2010
Mailing Address PO BOX 7247-0244		Amount 146.38 Transaction ID : F57.4379
City Philadelphia	State PA	
Zip Code 19170-0001	Purpose of Expenditure Overnight Deliveries to NH Canvass	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 65204.87		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	1742.51
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Jonathan Urena-Cherry		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 398 Bridge St. #3		Amount 539.50 Transaction ID : F57.4306
City Manchester	State NH	
Zip Code 03104	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 46005.19		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Nathan Urena-Cherry		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 363 Kimball St.		Amount 581.75 Transaction ID : F57.4338
City Manchester	State NH	
Zip Code 03102	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 51702.93		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee USAirways		Date MM / DD / YYYY 11 / 24 / 2010
Mailing Address		Amount 229.80 Transaction ID : F57.4352
City	State	
Zip Code	Purpose of Expenditure Field Travel	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 73790.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1351.05
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Verizon		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address PO Box 15026		Amount 293.93 Transaction ID : F57.4380
City Albany	State NY	
Zip Code 12212-5026	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Purpose of Expenditure Internet for Canvass Office		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 18253.25		

Full Name (Last, First, Middle Initial) of Payee Charlie Viscens		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 11 River Lane		Amount 350.00 Transaction ID : F57.4269
City Levittown	State PA	
Zip Code 19055	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Purpose of Expenditure Canvasser Payment and Mileage Reimbursement		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 9040.28		

Full Name (Last, First, Middle Initial) of Payee Agnes Vollkomer		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 40 Hillside Dr.		Amount 1316.14 Transaction ID : F57.4246
City Gifford	State NH	
Zip Code 03249	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Purpose of Expenditure Canvasser Payment and Mileage Reimbursement		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 30638.69		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1960.07
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Sarah Von Esch		Date MM / DD / YYYY 11 / 09 / 2010
Mailing Address 1825 K St. NW Suite 210		Amount 87.00 Transaction ID : F57.4368
City Washington	State DC	
Zip Code 20006	Category/Type 002	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Purpose of Expenditure Travel Reimbursement		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 62036.62		

Full Name (Last, First, Middle Initial) of Payee Ross Wallen		Date MM / DD / YYYY 11 / 09 / 2010
Mailing Address 1825 K St. NW Suite 210		Amount 142.29 Transaction ID : F57.4366
City Washington	State DC	
Zip Code 20006	Category/Type 002	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Purpose of Expenditure Travel Reimbursement		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 21733.72		

Full Name (Last, First, Middle Initial) of Payee Barbar Walsh		Date MM / DD / YYYY 11 / 08 / 2010
Mailing Address 66 Teal Drive		Amount 526.21 Transaction ID : F57.4258
City Langhorne	State PA	
Zip Code 19047	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Purpose of Expenditure Canvasser Payment and Mileage Reimbursement		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 19903.76		

(a) SUBTOTAL of Itemized Independent Expenditures.....	755.50
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee David Walsh		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 472 Lawrence Circle		Amount 400.00 Transaction ID : F57.4282
City Langhorne	State PA	
Zip Code 19047	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 10496.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Jan Wawrzynek		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 7 Northbrook Dr. #70		Amount 403.00 Transaction ID : F57.4301
City Manchester	State NH	
Zip Code 03102	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 44604.48		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Howard Wharton		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 11 River Lane		Amount 450.00 Transaction ID : F57.4297
City Levittown	State PA	
Zip Code 19055	Purpose of Expenditure Canvasser Payment	Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 11796.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1253.00
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Kenneth Wickhorst		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 168 Merrimack St. #2		Amount 620.75 Transaction ID : F57.4314
City Manchester	State NH	
Zip Code 03103		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 47811.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Ralph Willette		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 18 Dominique Dr.		Amount 329.35 Transaction ID : F57.4357
City Concord	State NH	
Zip Code 03301		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 52997.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Andrew Woodrow		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 12 Ring Lane		Amount 150.00 Transaction ID : F57.4253
City Levittown	State PA	
Zip Code 19055		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 8240.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1100.10
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee Richard Wyatt		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 236 Bank St.		Amount 250.00 Transaction ID : F57.4361
City Morrisville	State PA	
Zip Code 19067		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 16266.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Kristen Zearfoss		Date MM / DD / YYYY 11 / 09 / 2010
Mailing Address 1825 K St. NW Suite 210		Amount 84.00 Transaction ID : F57.4316
City Washington	State DC	
Zip Code 20006		
Purpose of Expenditure Travel Reimbursement	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 20926.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Colin Zelin		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 4 Pennsbury Ct.		Amount 70.00 Transaction ID : F57.4277
City Yardley	State PA	
Zip Code 19067		
Purpose of Expenditure Canvasser Payment	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK J. MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 9560.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	404.00
(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)
USACTION

Full Name (Last, First, Middle Initial) of Payee C. Olivia Zink		Date MM / DD / YYYY 11 / 02 / 2010
Mailing Address 4 Park St. Suite 304		Amount 2594.30 Transaction ID : F57.4265
City Concord	State NH	
Zip Code 03301	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Purpose of Expenditure Canvass Salary, Supplies and Food		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 35397.09		

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY
Mailing Address		Amount
City	State	
Zip Code	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Purpose of Expenditure		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought		

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY
Mailing Address		Amount
City	State	
Zip Code	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Purpose of Expenditure		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	2594.30
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	65397.82
(carry total from last page forward to Line 7)		