Image# 10931774521 107/**29**#20/120 15:43

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

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

(a) Name of Individual, Organization or Corporation	1
SIERRA CLUB	
(b) Address (number and street) should if different then provide a large various	
(b) Address (number and street)	
(c) City, State and ZIP Code	3. FEC Identification Number
SAN FRANCISCO CA 94105	
2. Corporate filers only	C C90011875
Is the filer a qualified nonprofit corporation?	
Individual filers only Name of Employer	
ivalile of Employer	Cocapation
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report 🛛 24-Hour Notice 🔲 48-Hour	Notice
(a) April 13 Quarterly Report	Notice
☐ July 15 Quarterly Report	
October Quarterly Report	
☐ January 31 Year-End Report	
(b) Is this Report an amendment? Yes \(\subseteq \text{No } \overline{X} \)	
5. COVERING PERIOD: FROM M M / D D / Y Y Y Y	
THROUGH	
M M / D D / Y Y Y	
6. TOTAL CONTRIBUTIONS	.00
7. TOTAL INDEPENDENT EXPENDITURES	11981.00
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulation	the independent expenditures
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Gayle Sheehan	10/29/2010
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report	to the penalties of 2 U.S.C 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)
SIERRA CLUB

Full Name (Last, First, Middle Initial) of Payee		Date
Winning Connections		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 317 Pennsylvania Ave SE		1 0 3 0 2 0 1 0 Amount
City State	Zip Code	11481.00
Washington DC	20003	
Purpose of Expenditure	Category/	Office Sought: X House State: NV
Phonebank - GOTV Name of Federal Candidate Supported or Opposed by Expenditure:	Type	House Senate District: 03
Dina Titus		Check One: X Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General
for Office Sought	120919.87	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Arts of Peace, Inc		10 26 Y Y Y Y Y Y Y
Mailing Address		1.0 2.6 2.0 1.0 Amount
854 9th St., Ste. B		
City State	Zip Code	500.00
Arcata CA	95521	
Purpose of Expenditure	Category/	Office Sought: X House State: NV
Media Outreach	Type	House Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure:		President
Dina Titus		Check One: X Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General
for Office Sought	120919.87	Other (specify)
	I	
(a) SUBTOTAL of Itemized Independent Expenditures		11981.00
(a) SSSICIAL OF ROTHER INDEPENDENT Experiorities		
(b) SUBTOTALof Unitemized Independent Expenditures		
, , , , , , , , , , , , , , , , , , , ,		
(c) TOTAL Independent Expenditures		