Image# 10931508538 10%/45#20140 18:27

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	7 .
THE ADVOCACY FUND	
(b) Address (number and street)	
(c) City, State and ZIP Code	
SAN FRANCISCO CA 94129	FEC Identification Number
2. Corporate filers only Is the filer a qualified nonprofit corporation? Yes X No	C C90011750
Individual filers only Name of Employer	Occupation
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report 24-Hour Notice 48-Hou	r Notice
☐ July 15 Quarterly Report	
☑ October Quarterly Report	
☐ January 31 Year-End Report	
(b) Is this Report an amendment? Yes \(\square\) No \(\overline{X} \)	
5. COVERING PERIOD: FROM MONTO / DON / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
THROUGH	
M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
6. TOTAL CONTRIBUTIONS	3333.37
7. TOTAL INDEPENDENT EXPENDITURES	11325.00
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, c request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulati	if the independent expenditures
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Danica Anne Remy	10/15/2010
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report	t 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-A ITEMIZED RECEIPTS

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O	ny information copied from such Reports and St	atements may no	ot be sold or used by	y any person for the mmittee to solicit	ne purpose of soliciting contributions contributions from such committee
	NAME OF FILER (In Full)				
	THE ADVOCACY FUND				
A.	Full Name (Last, First, Middle Initial) Campaign For Community Change				Date of Receipt
	Mailing Address 1536 U Street NW				$\begin{bmatrix} M & M \\ O & 9 \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 2 & 8 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} \ Y$
	City	State	Zip Code		Transaction ID: F56.000001
	Washington	DC	20009		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			1158.28
	Name of Employer			Occupation	
	N/A - This is an in-kind donation of			voter list, s	taff, consultant time
В.	Full Name (Last, First, Middle Initial) Campaign For Community Change				Date of Receipt
	Mailing Address 1536 U Street NW				$\begin{bmatrix} M & M \\ 0 & 9 \end{bmatrix} / \begin{bmatrix} D & D \\ 2 & 9 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City	State	Zip Code		Transaction ID: F56.000002
	Washington	DC	20009		Amount of Each Receipt this Period
	FEC ID number of contributing				1102.84
	federal political committee.	С			
	Name of Employer			Occupation	
	N/A - This is an in-kind donation of			voter list, s	taff, consultant time
C.	Full Name (Last, First, Middle Initial)				Date of Receipt
	Campaign For Community Change Mailing Address				M M / D D / Y Y Y Y
	1536 U Street NW				09 30 2010
	City	State	Zip Code		Transaction ID: F56.000003
	Washington	DC	20009		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			1072.25
	Name of Employer			Occupation	
				voter list, s	taff, consultant time

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page carry total to Line 6)

3333.37

3333.37

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FOR LINE 7 FOR FORM 5

ME OF FILER (In Full) THE ADVOCACY FUND			
[5 u.)			1
Full Name (Last, First, Middle Initial) of Payee Californians for Human Immigrant Rig		ion Fund	Date M M
Mailing Address 2533 W. 3rd St Suite 101H			Amount
City Los Angeles	State CA	Zip Code 90057	2175.00
Purpose of Expenditure live phone bank		Category/ Type	Office Sought: House State: IL Senate X Senate
Name of Federal Candidate Supported or Op Mark Steven Kirk	posed by Expenditure:		President District: Check One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	2175.00	Disbursement For: Primary X General 2010 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Illinois Immigrant Action			Date
Mailing Address 55 E Jackson Blvd Suite 2075			Amount
City Chicago	State IL	Zip Code 60604	1600.00
Purpose of Expenditure live phone bank		Category/ Type	Office Sought: House State: IL Senate X Senate District:
Name of Federal Candidate Supported or Opp Mark Steven Kirk	posed by Expenditure:		President Check One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought		3775.00	Disbursement For: Primary X General 2010 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Californians for Human Immigrant Rig		ion Fund	Date M. M. / D. D. / Y. Y. Y. Y.
Mailing Address 2533 W. 3rd St Suite 101H			M 0 9
City Los Angeles	State CA	Zip Code 90057	2175.00
Purpose of Expenditure live phone bank		Category/ Type	Office Sought: House State: IL Senate X Senate District:
Name of Federal Candidate Supported or Opp Mark Steven Kirk	posed by Expenditure:		President Check One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought		5950.00	Disbursement For: Primary X General 2010 Other (specify)
(a) SUBTOTAL of Itemized Independent Expe	enditures		5950.00
(b) SUBTOTALof Unitemized Independent Ex	xpenditures		
(c) TOTAL Independent Expenditures(carry total from last page forward			

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FOR LINE 7 FOR FORM 5

ME OF FILER (In Full)			FOR LINE / FOR FORIVI S
HE ADVOCACY FUND			
TE NO VOONOT 1 ST.			
Full Name (Last, First, Middle Initial) of Payee			1 5.
Illinois Immigrant Action			Date
			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address 55 E Jackson Blvd Suite 2075			Amount
	Ctoto	7' - Oodo	1600.00
City Chicago	State IL	Zip Code 60604	
Purpose of Expenditure		T	Office Sought: House out II
live phone bank		Category/ Type	State: 1L
Name of Federal Candidate Supported or Oppo	d by Evnenditure		Senate X Senate District:
vame of Federal Candidate Supported of Oppo Mark Steven Kirk	Sed by Experionare.	:	Check One: Support X Oppose
Calendar Year-To-Date Per Election		7550.00	2010
for Office Sought		7330.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Illinois Immigrant Action			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address			
55 E Jackson Blvd Suite 2075			Amount
City	State	Zip Code	1600.00
Chicago	IL	60604	
Purpose of Expenditure		Category/	Office Sought: House State: IL
live phone bank		Туре	Senate X Senate District:
Name of Federal Candidate Supported or Oppo	sed by Expenditure:	:	President
Mark Steven Kirk			Check One: Support X Oppose
Calendar Year-To-Date Per Election			Disbursement For: Primary X General
for Office Sought	L	9150.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Californians for Human Immigrant Right	ts Leadership Ac	tion Fund	
Mailing Address			0 9 / D 3 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
2533 W. 3rd St Suite 101H			Amount
City	State	Zip Code	2175.00
Los Angeles	CA	90057	
Purpose of Expenditure		Category/	Office Sought: House State: IL
live phone bank		Туре	Senate X Senate
Name of Federal Candidate Supported or Oppo	sed by Expenditure:	:	President District:
Mark Steven Kirk			Check One: Support X Oppose
Calendar Year-To-Date Per Election			Disbursement For: Primary X General
for Office Sought		11325.00	2010 Cther (specify)
a) SUBTOTAL of Itemized Independent Expen	ditures		5375.00
,			
(b) SUBTOTALof Unitemized Independent Exp	enditures		
			11325.00
(c) TOTAL Independent Expenditures (carry total from last page forward to			
(see) total manufactor page to man a to			