

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 THE ADVOCACY FUND | | 3. FEC Identification Number C C90011750 |
| (b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1012 TORNEY AVE | | |
| (c) City, State and ZIP Code SAN FRANCISCO CA 94129 | | |
| 2. Corporate filers only | Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Individual filers only | Name of Employer Occupation | |

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report 24-Hour Notice 48-Hour Notice
- July 15 Quarterly Report
- October Quarterly Report
- January 31 Year-End Report

(b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

| | |
|---|---|
| M | M |
| 1 | 0 |

 /

| | |
|---|---|
| D | D |
| 0 | 1 |

 /

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

THROUGH

| | |
|---|---|
| M | M |
| 1 | 2 |

 /

| | |
|---|---|
| D | D |
| 3 | 1 |

 /

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

| | | |
|--|---|----------|
| 6. TOTAL CONTRIBUTIONS | <table border="1" style="width: 100%;"><tr><td style="text-align: center;">9781.70</td></tr></table> | 9781.70 |
| 9781.70 | | |
| 7. TOTAL INDEPENDENT EXPENDITURES..... | <table border="1" style="width: 100%;"><tr><td style="text-align: center;">37289.74</td></tr></table> | 37289.74 |
| 37289.74 | | |

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Danica Remy

01/28/2011

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-A
ITEMIZED RECEIPTS**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit 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 M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0 | | |
| Mailing Address 1536 U Street NW | | | Transaction ID: F56.000002 | | |
| City | State | Zip Code | Amount of Each Receipt this Period _____ 1096.19 | | |
| Washington | DC | 20009 | | | |
| FEC ID number of contributing federal political committee. C _____ | | | | | |
| Name of Employer N/A - This is an in-kind donation | | | Occupation voter list, staff and consultant time | | |

| | | | | | |
|--|-------|----------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Campaign for Community Change | | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 1 0 | | |
| Mailing Address 1536 U Street NW | | | Transaction ID: F56.000003 | | |
| City | State | Zip Code | Amount of Each Receipt this Period _____ 1111.18 | | |
| Washington | DC | 20009 | | | |
| FEC ID number of contributing federal political committee. C _____ | | | | | |
| Name of Employer N/A - This is an in-kind donation | | | Occupation voter list, staff and consultant time | | |

| | | | | | |
|--|-------|----------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Campaign for Community Change | | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 1 0 | | |
| Mailing Address 1536 U Street NW | | | Transaction ID: F56.000004 | | |
| City | State | Zip Code | Amount of Each Receipt this Period _____ 1033.34 | | |
| Washington | DC | 20009 | | | |
| FEC ID number of contributing federal political committee. C _____ | | | | | |
| Name of Employer N/A - This is an in-kind donation | | | Occupation voter list, staff and consultant time | | |

| | | | | | |
|--|-------|----------|---|--|--|
| D. Full Name (Last, First, Middle Initial) Campaign for Community Change | | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 1 0 | | |
| Mailing Address 1536 U Street NW | | | Transaction ID: F56.000005 | | |
| City | State | Zip Code | Amount of Each Receipt this Period _____ 1138.03 | | |
| Washington | DC | 20009 | | | |
| FEC ID number of contributing federal political committee. C _____ | | | | | |
| Name of Employer N/A - This is an in-kind donation | | | Occupation voter list, staff and consultant time | | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | _____ 4378.74 |
| TOTAL This Period (last page carry total to Line 6) | _____ |

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF FILER (In Full)
THE ADVOCACY FUND

| | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---|---------|
| A. Full Name (Last, First, Middle Initial) <u>Campaign for Community Change</u> Mailing Address 1536 U Street NW <hr/> City State Zip Code Washington DC 20009 <hr/> FEC ID number of contributing federal political committee. C <input style="width:150px;" type="text"/> <hr/> Name of Employer Occupation N/A - This is an in-kind donation voter list, staff and consultant time | Date of Receipt <table style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Transaction ID: F56.000006 <hr/> Amount of Each Receipt this Period <table style="width:100%; text-align: right;"> <tr> <td><input style="width:150px;" type="text"/></td> <td style="text-align: right;">1174.93</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 0 | 7 | | 2 | 0 | 1 | 0 | <input style="width:150px;" type="text"/> | 1174.93 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 1 | 0 | | 0 | 7 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | | | |
| <input style="width:150px;" type="text"/> | 1174.93 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---|---------|
| B. Full Name (Last, First, Middle Initial) <u>Campaign for Community Change</u> Mailing Address 1536 U Street NW <hr/> City State Zip Code Washington DC 20009 <hr/> FEC ID number of contributing federal political committee. C <input style="width:150px;" type="text"/> <hr/> Name of Employer Occupation N/A - This is an in-kind donation voter list, staff and consultant time | Date of Receipt <table style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Transaction ID: F56.000007 <hr/> Amount of Each Receipt this Period <table style="width:100%; text-align: right;"> <tr> <td><input style="width:150px;" type="text"/></td> <td style="text-align: right;">1164.65</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 0 | 8 | | 2 | 0 | 1 | 0 | <input style="width:150px;" type="text"/> | 1164.65 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 1 | 0 | | 0 | 8 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | | | |
| <input style="width:150px;" type="text"/> | 1164.65 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---|--------|
| C. Full Name (Last, First, Middle Initial) <u>Campaign for Community Change</u> Mailing Address 1536 U Street NW <hr/> City State Zip Code Washington DC 20009 <hr/> FEC ID number of contributing federal political committee. C <input style="width:150px;" type="text"/> <hr/> Name of Employer Occupation N/A - This is an in-kind donation voter list, staff and consultant time | Date of Receipt <table style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Transaction ID: F56.000008 <hr/> Amount of Each Receipt this Period <table style="width:100%; text-align: right;"> <tr> <td><input style="width:150px;" type="text"/></td> <td style="text-align: right;">284.68</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 2 | 0 | | 2 | 0 | 1 | 0 | <input style="width:150px;" type="text"/> | 284.68 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 1 | 0 | | 2 | 0 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | | | |
| <input style="width:150px;" type="text"/> | 284.68 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---|--------|
| D. Full Name (Last, First, Middle Initial) <u>Campaign for Community Change</u> Mailing Address 1536 U Street NW <hr/> City State Zip Code Washington DC 20009 <hr/> FEC ID number of contributing federal political committee. C <input style="width:150px;" type="text"/> <hr/> Name of Employer Occupation N/A - This is an in-kind donation voter list, staff and consultant time | Date of Receipt <table style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Transaction ID: F56.000009 <hr/> Amount of Each Receipt this Period <table style="width:100%; text-align: right;"> <tr> <td><input style="width:150px;" type="text"/></td> <td style="text-align: right;">531.30</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 2 | 1 | | 2 | 0 | 1 | 0 | <input style="width:150px;" type="text"/> | 531.30 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 1 | 0 | | 2 | 1 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | | | |
| <input style="width:150px;" type="text"/> | 531.30 | | | | | | | | | | | | | | | | | | | | | | |

| | |
|--|---|
| SUBTOTAL of Receipts This Page (optional) | <input style="width:150px;" type="text"/> 3155.56 |
| TOTAL This Period (last page carry total to Line 6) | <input style="width:150px;" type="text"/> |

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit 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 M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0 | | |
| Mailing Address 1536 U Street NW | | | Transaction ID: F56.000010 | | |
| City | State | Zip Code | Amount of Each Receipt this Period 146.48 | | |
| Washington | DC | 20009 | | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer N/A - This is an in-kind donation | | | Occupation voter list, staff and consultant time | | |

| | | | | | |
|--|-------|----------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Campaign for Community Change | | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0 | | |
| Mailing Address 1536 U Street NW | | | Transaction ID: F56.000011 | | |
| City | State | Zip Code | Amount of Each Receipt this Period 261.15 | | |
| Washington | DC | 20009 | | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer N/A - This is an in-kind donation | | | Occupation voter list, staff and consultant time | | |

| | | | | | |
|--|-------|----------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Campaign for Community Change | | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0 | | |
| Mailing Address 1536 U Street NW | | | Transaction ID: F56.000012 | | |
| City | State | Zip Code | Amount of Each Receipt this Period 156.79 | | |
| Washington | DC | 20009 | | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer N/A - This is an in-kind donation | | | Occupation voter list, staff and consultant time | | |

| | | | | | |
|--|-------|----------|---|--|--|
| D. Full Name (Last, First, Middle Initial) Campaign for Community Change | | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0 | | |
| Mailing Address | | | Transaction ID: F56.000013 | | |
| City | State | Zip Code | Amount of Each Receipt this Period 210.87 | | |
| Washington | DC | 20009 | | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer N/A - This is an in-kind donation | | | Occupation voter list, staff and consultant time | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 775.29 |
| TOTAL This Period (last page carry total to Line 6) | |

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit 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 M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0 | | |
| Mailing Address 1536 U Street NW | | | Transaction ID: F56.000014 | | |
| City | State | Zip Code | Amount of Each Receipt this Period 201.44 | | |
| Washington | DC | 20009 | | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer N/A - This is an in-kind donation | | | Occupation voter list, staff and consultant time | | |

| | | | | | |
|--|-------|----------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Campaign for Community Change | | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 1 0 | | |
| Mailing Address 1536 U Street NW | | | Transaction ID: F56.000015 | | |
| City | State | Zip Code | Amount of Each Receipt this Period 215.89 | | |
| Washington | DC | 20009 | | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer N/A - This is an in-kind donation | | | Occupation voter list, staff and consultant time | | |

| | | | | | |
|--|-------|----------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Campaign for Community Change | | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0 | | |
| Mailing Address 1536 U Street NW | | | Transaction ID: F56.000016 | | |
| City | State | Zip Code | Amount of Each Receipt this Period 324.48 | | |
| Washington | DC | 20009 | | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer N/A - This is an in-kind donation | | | Occupation voter list, staff and consultant time | | |

| | | | | | |
|--|-------|----------|---|--|--|
| D. Full Name (Last, First, Middle Initial) Campaign for Community Change | | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0 | | |
| Mailing Address 1536 U Street NW | | | Transaction ID: F56.000017 | | |
| City | State | Zip Code | Amount of Each Receipt this Period 730.30 | | |
| Washington | DC | 20009 | | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer N/A - This is an in-kind donation | | | Occupation voter list, staff and consultant time | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 1472.11 |
| TOTAL This Period (last page carry total to Line 6) | 9781.70 |

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

THE ADVOCACY FUND

Full Name (Last, First, Middle Initial) of Payee
California for Human Immigrant Rights Leadership Action Fund

Date
MM / DD / YYYY
10 / 01 / 2010

Mailing Address
2533 W. 3rd Street, Suite 101H

Amount
2175.00

City State Zip Code
Los Angeles CA 90057

Purpose of Expenditure
phone banking
Category/Type

Office Sought: House State: IL
 Senate
 President District: _____
Check One: Support Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Calendar Year-To-Date Per Election
for Office Sought 15100.00

Disbursement For: 2010
 Primary General
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Illinois Immigrant Action

Date
MM / DD / YYYY
10 / 01 / 2010

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount
1600.00

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking
Category/Type

Office Sought: House State: IL
 Senate
 President District: _____
Check One: Support Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Calendar Year-To-Date Per Election
for Office Sought 15100.00

Disbursement For: 2010
 Primary General
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee
California for Human Immigrant Rights Leadership Action Fund

Date
MM / DD / YYYY
10 / 04 / 2010

Mailing Address
2533 W. 3rd Street, Suite 101H

Amount
2175.00

City State Zip Code
Los Angeles CA 90057

Purpose of Expenditure
phone banking
Category/Type

Office Sought: House State: IL
 Senate
 President District: _____
Check One: Support Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Calendar Year-To-Date Per Election
for Office Sought 18875.00

Disbursement For: 2010
 Primary General
 Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures 5950.00

(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)

THE ADVOCACY FUND

Full Name (Last, First, Middle Initial) of Payee
Illinois Immigrant Action

Date

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

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount

1600.00

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 18875.00

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
California for Human Immigrant Rights Leadership Action Fund

Date

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Mailing Address
2533 W. 3rd Street, Suite 101H

Amount

2175.00

City State Zip Code
Los Angeles CA 90057

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 22650.00

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Illinois immigrant Action

Date

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount

1600.00

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 22650.00

Disbursement For: Primary General
2010
 Other (specify) _____

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

5375.00

(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)

THE ADVOCACY FUND

Full Name (Last, First, Middle Initial) of Payee
California for Human Immigrant Rights Leadership Action Fund

Date
MM / DD / YYYY
10 / 06 / 2010

Mailing Address
2533 W. 3rd Street, Suite 101H

Amount
2175.00

City State Zip Code
Los Angeles CA 90057

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 26425.00

Disbursement For: Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Illinois Immigrant Action

Date
MM / DD / YYYY
10 / 06 / 2010

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount
1600.00

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 26425.00

Disbursement For: Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
California for Human Immigrant Rights Leadership Action Fund

Date
MM / DD / YYYY
10 / 07 / 2010

Mailing Address
2533 W. 3rd Street, Suite 101H

Amount
2175.00

City State Zip Code
Los Angeles CA 90057

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 28600.00

Disbursement For: Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures 5950.00

(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)

THE ADVOCACY FUND

Full Name (Last, First, Middle Initial) of Payee
Illinois Immigrant Action

Date

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount

1600.00

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 30200.00

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
California for Human Immigrant Rights Leadership Action Fund

Date

M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Mailing Address
2533 W. 3rd Street, Suite 101H

Amount

2175.00

City State Zip Code
Los Angeles CA 90057

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 33975.00

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Illinois Immigrant Action

Date

M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount

1600.00

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 33975.00

Disbursement For: Primary General
2010
 Other (specify) _____

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

5375.00

(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)

THE ADVOCACY FUND

Full Name (Last, First, Middle Initial) of Payee
Illinois Immigrant Action

Date

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

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount

1232.28

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 35207.58

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Illinois Immigrant Action

Date

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount

958.33

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 36165.61

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Illinois Immigrant Action

Date

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 1 0

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount

958.33

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 37123.94

Disbursement For: Primary General
2010
 Other (specify) _____

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

3148.94

(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)

THE ADVOCACY FUND

Full Name (Last, First, Middle Initial) of Payee
California for Human Immigrant Rights Leadership Action Fund

Date
MM / DD / YYYY
11 / 01 / 2010

Mailing Address
2533 W. 3rd Street, Suite 101H

Amount
554.15

City State Zip Code
Los Angeles CA 90057

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 39086.42

Disbursement For: Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Illinois Immigrant Action

Date
MM / DD / YYYY
11 / 01 / 2010

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount
1408.33

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 39086.42

Disbursement For: Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
California for Human Immigrant Rights Leadership Action Fund

Date
MM / DD / YYYY
11 / 02 / 2010

Mailing Address
2533 W. 3rd Street, Suite 101H

Amount
2216.66

City State Zip Code
Los Angeles CA 90057

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulias

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 43011.41

Disbursement For: Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures 4179.14

(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)

THE ADVOCACY FUND

Full Name (Last, First, Middle Initial) of Payee
Illinois Immigrant Action

Date

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

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount

1708.33

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Alexi Giannoulis

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 43011.11

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
California for Human Immigrant Rights Leadership Action Fund

Date

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

Mailing Address
2533 W. 3rd Street, Suite 101H

Amount

719.04

City State Zip Code
Los Angeles CA 90057

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Michael Bennet

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1071.12

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Illinois Immigrant Action

Date

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

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount

352.08

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Michael Bennet

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1071.12

Disbursement For: Primary General
2010
 Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures

2779.45

(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)

THE ADVOCACY FUND

Full Name (Last, First, Middle Initial) of Payee
California for Human Immigrant Rights Leadership Action Fund

Date
MM / DD / YYYY
10 / 21 / 2010

Mailing Address
2533 W. 3rd Street, Suite 101H

Amount
1078.56

City State Zip Code
Los Angeles CA 90057

Purpose of Expenditure
phone banking
Category/Type

Office Sought: House State: CO
 Senate
 President District: _____
Check One: Support Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Michael Bennet

Calendar Year-To-Date Per Election
for Office Sought 3029.88

Disbursement For: 2010
 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Illinois immigrant Action

Date
MM / DD / YYYY
10 / 21 / 2010

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount
880.20

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking
Category/Type

Office Sought: House State: CO
 Senate
 President District: _____
Check One: Support Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Michael Bennet

Calendar Year-To-Date Per Election
for Office Sought 3029.88

Disbursement For: 2010
 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Illinois Immigrant Action

Date
MM / DD / YYYY
10 / 22 / 2010

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount
352.08

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking
Category/Type

Office Sought: House State: CO
 Senate
 President District: _____
Check One: Support Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Michael Bennet

Calendar Year-To-Date Per Election
for Office Sought 3381.96

Disbursement For: 2010
 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures 2310.84

(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)

THE ADVOCACY FUND

Full Name (Last, First, Middle Initial) of Payee
California for Human Immigrant Rights Leadership Action Fund

Date
MM / DD / YYYY
10 / 25 / 2010

Mailing Address
2533 W. 3rd Street, Suite 101H

Amount
719.04

City State Zip Code
Los Angeles CA 90057

Purpose of Expenditure
phone banking
Category/Type

Office Sought: House State: CO
 Senate
 President District: _____
Check One: Support Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Michael Bennet

Calendar Year-To-Date Per Election
for Office Sought 4453.08

Disbursement For: 2010
 Primary General
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Illinois Immigrant Action

Date
MM / DD / YYYY
10 / 25 / 2010

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount
352.08

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking
Category/Type

Office Sought: House State: CO
 Senate
 President District: _____
Check One: Support Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Michael Bennet

Calendar Year-To-Date Per Election
for Office Sought 4453.08

Disbursement For: 2010
 Primary General
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee
California for Human Immigrant Rights Leadership Action Fund

Date
MM / DD / YYYY
10 / 26 / 2010

Mailing Address
2533 W. 3rd Street, Suite 101H

Amount
359.52

City State Zip Code
Los Angeles CA 90057

Purpose of Expenditure
phone banking
Category/Type

Office Sought: House State: CO
 Senate
 President District: _____
Check One: Support Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Michael Bennet

Calendar Year-To-Date Per Election
for Office Sought 4988.64

Disbursement For: 2010
 Primary General
 Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures 1430.64

(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)

THE ADVOCACY FUND

Full Name (Last, First, Middle Initial) of Payee
Illinois Immigrant Action

Date

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Mailing Address
55 E Jackson Blvd, Suite 2075

Amount

176.04

City State Zip Code
Chicago IL 60604

Purpose of Expenditure
phone banking

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Michael Bennet

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 4988.64

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Fenton Communications

Date

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

Mailing Address
1000 Vermont Avenue, NW, Suite 200

Amount

262.50

City State Zip Code
Washington DC 20005

Purpose of Expenditure
press release

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Raul Grijalva

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 614.69

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Frank Clemente

Date

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

Mailing Address
The Advocacy Fund
PO Box 29229

Amount

233.16

City State Zip Code
San Francisco CA 94129

Purpose of Expenditure
press release

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Raul Grijalva

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 614.69

Disbursement For: Primary General
2010
 Other (specify) _____

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

671.70

(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)

THE ADVOCACY FUND

Full Name (Last, First, Middle Initial) of Payee
Josh Rosenblum

Date

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

Mailing Address
The Advocacy Fund
PO Box 29229

Amount

74.60

City State Zip Code
San Francisco CA 94129

Purpose of Expenditure
press release

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Raul Grijalva

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 614.69

Disbursement For: Primary General
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Nancy Altman

Date

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

Mailing Address
The Advocacy Fund
PO Box 29229

Amount

44.43

City State Zip Code
San francisco CA 94129

Purpose of Expenditure
press release

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
Raul Grijalva

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 614.69

Disbursement For: Primary General
 Other (specify)

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

119.03

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

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

37289.74