



May 16, 2011

Federal Election Commission  
999 E Street N.W.  
Washington, DC 20463

RECEIVED  
2011 MAY 16 PM 3:14  
FEC MAIL CENTER

BY HAND

To whom it concerns:

At counsel for One America Votes, I am submitting for filing the two attached Reports of Independent Expenditures Made and Contributions Received (FEC Form 5), one a report for the third quarter of 2010 and the other a 2010 Year-End Report. One America Votes is a Washington State nonprofit corporation and is not a political committee. These are the first reports that One America Votes has filed with the Commission, as One America Votes did not engage in any independent expenditures or other reportable activities prior to the third quarter of 2010. As a result, One America Votes does not have an FEC identification number.

One America Votes attempted to file these two reports by facsimile on January 31, 2010. However, the reports have not appeared in the Commission's online disclosure database, and the Commission's information division has advised the organization to resubmit these filings.

Please stamp the duplicate copies of the reports provided to indicate receipt of these filings and return them to the messenger for return to me.

Thank you for your assistance in this matter. Please contact me if you have any questions about this matter.

Sincerely,

John Pomeranz

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# 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 <b>One America Votes</b>		3. FEC Identification Number <b>C</b>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported <b>1225 S Weller Street #200</b>		
(c) City, State and ZIP Code <b>Seattle, WA 98144</b>		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" 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

07 01 2010  
THROUGH  
09 30 2010

6. TOTAL CONTRIBUTIONS ..... 0.00

7. TOTAL INDEPENDENT EXPENDITURES ..... 951.32

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

**Pramila Jayapal**

*Pramila Jayapal* 1/31/11

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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**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)  
**One America Votes**

**A. Full Name (Last, First, Middle Initial)**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Date of Receipt

Amount of Each Receipt this Period

**B. Full Name (Last, First, Middle Initial)**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Date of Receipt

Amount of Each Receipt this Period

**C. Full Name (Last, First, Middle Initial)**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Date of Receipt

Amount of Each Receipt this Period

**D. Full Name (Last, First, Middle Initial)**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL of Receipts This Page (optional)** ..... ▶ **0.00**

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

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**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
**One America Votes**

Full Name (Last, First, Middle Initial) of Payee <b>Elsa Batres-Boni</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>107.71</b>
City <b>Seattle</b>	State Zip Code <b>WA 98144</b>	
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input type="checkbox"/> House State: <b>WA</b> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Patty Murray</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>107.71</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Elsa Batres-Boni</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>84.63</b>
City <b>Seattle</b>	State Zip Code <b>WA 98144</b>	
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>WA</b> <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Suzan DelBene</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>84.63</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Elsa Batres-Boni</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>23.08</b>
City <b>Seattle</b>	State Zip Code <b>WA 98144</b>	
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>WA</b> <input type="checkbox"/> Senate District: <b>02</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Rick Larsen</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>23.08</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>215.42</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

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**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
**One America Votes**

Full Name (Last, First, Middle Initial) of Payee <b>Maha Jahahan</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>67.69</b>
City <b>Seattle</b>	State <b>WA</b>	
Zip Code <b>98144</b>		
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>WA</b> <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Patty Murray</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>175.40</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Maha Jahahan</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>49.23</b>
City <b>Seattle</b>	State <b>WA</b>	
Zip Code <b>98 144</b>		
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>WA</b> <input type="checkbox"/> Senate District: <b>08</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Suzan DelBene</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>133.86</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Maja Jahahan</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>18.46</b>
City <b>Seattle</b>	State <b>WA</b>	
Zip Code <b>98144</b>		
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>WA</b> <input type="checkbox"/> Senate District: <b>02</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Rick Larsen</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>41.54</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>135.38</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

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**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
**One America Votes**

Full Name (Last, First, Middle Initial) of Payee <b>Toby Guevin</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>88.70</b>
City <b>Seattle</b>	State <b>WA</b>	Zip Code <b>98144</b>
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>WA</b> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Patty Murray</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>264.10</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Toby Guevin</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>62.74</b>
City <b>Seattle</b>	State <b>WA</b>	Zip Code <b>98144</b>
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>WA</b> <input type="checkbox"/> Senate District: <b>8</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Suzan DelBene</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>196.60</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Toby Guevin</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>25.96</b>
City <b>Seattle</b>	State <b>WA</b>	Zip Code <b>98144</b>
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>WA</b> <input type="checkbox"/> Senate District: <b>02</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Rick Larsen</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>67.50</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>177.40</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

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**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
**One America Votes**

Full Name (Last, First, Middle Initial) of Payee <b>Kendra Anderson</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>63.97</b>
City <b>Seattle</b>	State <b>WA</b>	Zip Code <b>98144</b>
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input type="checkbox"/> House State: <b>WA</b> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Patty Murray</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>328.07</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Kendra Anderson</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>43.77</b>
City <b>Seattle</b>	State <b>WA</b>	Zip Code <b>98144</b>
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>WA</b> <input type="checkbox"/> Senate District: <b>08</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Suzan DelBene</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>240.37</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Kendra Anderson</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>20.20</b>
City <b>Seattle</b>	State <b>WA</b>	Zip Code <b>98144</b>
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>WA</b> <input type="checkbox"/> Senate District: <b>02</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Rick Larsen</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>87.70</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>127.94</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

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**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
**One America Votes**

Full Name (Last, First, Middle Initial) of Payee <b>Rahwa Habte</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>47.49</b>
City <b>Seattle</b>	State <b>WA</b>	
Zip Code <b>98144</b>		
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>WA</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Patty Murray</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>375.56</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Rahwa Habte</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>25.57</b>
City <b>Seattle</b>	State <b>WA</b>	
Zip Code <b>98144</b>		
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>WA</b> District: <b>08</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Suzan DelBene</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>265.94</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Rahwa Habte</b>		Date <b>09 30 2010</b>
Mailing Address <b>1225 S Weller #200</b>		Amount <b>21.92</b>
City <b>Seattle</b>	State <b>WA</b>	
Zip Code <b>98144</b>		
Purpose of Expenditure <b>Wages</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>WA</b> District: <b>02</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Rick Larsen</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>109.62</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>94.98</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

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**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
**One America Votes**

Full Name (Last, First, Middle Initial) of Payee <b>One America</b>		Date <b>09 30 2010</b>	
Mailing Address <b>1225 S Weller #200</b>		Amount <b>20.00</b>	
City <b>Seattle</b>	State <b>WA</b>	Zip Code <b>98144</b>	
Purpose of Expenditure <b>Printing</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>WA</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Patty Murray</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>395.56</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>One America</b>		Date <b>09 30 2010</b>	
Mailing Address <b>1225 S Weller #200</b>		Amount <b>20.00</b>	
City <b>Seattle</b>	State <b>Wa</b>	Zip Code <b>98144</b>	
Purpose of Expenditure <b>Printing</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>WA</b> District: <b>08</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Suzan DelBene</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>285.94</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Voter Activation Network</b>		Date <b>09 29 2010</b>	
Mailing Address <b>48 Grove Street #202</b>		Amount <b>80.10</b>	
City <b>Somerville</b>	State <b>MA</b>	Zip Code <b>02144</b>	
Purpose of Expenditure <b>Telephoning</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>WA</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Patty Murray</b>		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>475.66</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>120.10</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

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**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
**One America Votes**

Full Name (Last, First, Middle Initial) of Payee <b>Voter Activation Network</b>		Date <b>09 29 2010</b>
Mailing Address <b>48 Grove Street #202</b>		Amount <b>80.10</b>
City <b>Somerville</b>	State <b>MA</b>	Zip Code <b>02144</b>
Purpose of Expenditure <b>Telephoning</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>WA</b> <input type="checkbox"/> Senate District: <b>02</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Rick Larsen</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>189.72</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

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

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

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>80.10</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	<b>951.32</b>

11030604623

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt  
5/16/11

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

 5/16/11  
 PREPARER DATE PREPARED

11030604624