

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 NH Citizens Alliance for Action		3. FEC Identification Number C C90011933
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 4 Park Street, Suite 304		
(c) City, State and ZIP Code Concord NH 03301		
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 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 / /

THROUGH

/ /

6. TOTAL CONTRIBUTIONS

7. TOTAL INDEPENDENT EXPENDITURES.....

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
Sarah P. Chaisson Warner	_____	10/16/2010

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

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

NH Citizens Alliance for Action

Full Name (Last, First, Middle Initial) of Payee
Katherine Klem

Date

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

Mailing Address
795 Elm Street #503

Amount

1900.00

City State Zip Code
Manchester NH 03101

Purpose of Expenditure
Salary and mileage

Category/
Type

Office Sought: House State: NH
 Senate District: 01
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
Carol Shea-Porter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought .00

Disbursement For: Primary General
2010
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Foster's Newspaper

Date

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

Mailing Address

Amount

145.00

City State Zip Code
Dover NH 03820

Purpose of Expenditure
Job ad for canvassers

Category/
Type

Office Sought: House State: NH
 Senate District: 01
 President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought .00

Disbursement For: Primary General
2010
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Facebook.com

Date

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

Mailing Address

Amount

30.00

City State Zip Code

Purpose of Expenditure
Advertising for canvassers

Category/
Type

Office Sought: House State: NH
 Senate District: 01
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
Carol Shea-Porter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought .00

Disbursement For: Primary General
2010
 Other (specify)

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

2075.00

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

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

2075.00