



Debbie Wamsley <wamsley.debbie@yahoo.com> on 07/28/2010 09:00:40 PM

To: 2022190174@fec.gov
cc:

Subject: FEC Form 9 filing 7/28/10

Please see the attached
filing.



FEC Form 9 7-28-10.pdf

10030394670

FEC FORM 9 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name JA
New Leadership of Colorado

(b) Address (number and street) check if different than previously reported
11260 W 60th Avenue

(c) City, State and ZIP Code
Arvada CO 80004

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number

C

3. Is This Statement

New
or
 Amended

4. Covering Period

M M / D D / Y Y Y Y
07 / 27 / 2010
through
 M M / D D / Y Y Y Y
07 / 28 / 2010

5. (a) Date of Public Distribution(s) M M / D D / Y Y Y Y (b) Communication Title COLA
07 / 28 / 2010

6. The filer is a(n): (a) Individual (b) Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)

(d) Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) Other, specify: _____

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account? Yes No

8. Custodian of Records

(a) Name
Debbie Wamsley

(b) Address (number and street)
11260 W. 60th Avenue

(c) City, State and ZIP Code
Arvada CO 80004

(d) Name of Employer or Principal Place of Business
None

(e) Occupation
None

9. Total Donations This Statement

0.00

10. Total Disbursements/Obligations This Statement

20800.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM Debbie Wamsley

SIGNATURE Debbie Wamsley

DATE 7/28/10

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. 437g.

List of Person(s) Sharing/Exercising Control
(use additional pages as necessary)

11. Person(s) Sharing/Exercising Control

A. (a) Name Debbie Wamsley	Transaction ID : F91.4098
(b) Address (number and street) 11260 W. 60th Avenue	
(c) City, State and Zip Code Arvada CO 80004	
(d) Name of Employer or Principal Place of Business None	(e) Occupation None

10030394672

**SCHEDULE 9-B
Disbursement(s) Made or Obligations**

A. Full Name (Last, First, Middle Initial) of Payee Fortune Media, Inc. <hr/> Mailing Address of Payee 527 Avenue B <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Redondo Beach</td> <td>CA</td> <td>90277</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td style="width:40%;">Occupation</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>	City	State	Zip Code	Redondo Beach	CA	90277	Name of Employer	Occupation			Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">07</td> <td style="text-align: center;">27</td> <td style="text-align: center;">2010</td> </tr> </table> <hr/> Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">20800.00</div> <hr/> Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">07</td> <td style="text-align: center;">28</td> <td style="text-align: center;">2010</td> </tr> </table> <hr/> Transaction ID : F93.4100	M M	D D	Y Y Y Y	07	27	2010	M M	D D	Y Y Y Y	07	28	2010
City	State	Zip Code																					
Redondo Beach	CA	90277																					
Name of Employer	Occupation																						
M M	D D	Y Y Y Y																					
07	27	2010																					
M M	D D	Y Y Y Y																					
07	28	2010																					

Purpose of Disbursement (including title(s) of communication(s))

Radio Advertising and Production Costs

Name of Federal Candidate MICHAEL F BENNET	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO	District: 00	Disbursement/Obligation For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4102					
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:	District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:	District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)

20800.00

TOTAL This Period (last page this line number only)
(carry total from last page to line 10)

20800.00

10030394673

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.

10030394674

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): <i>E-mail</i>	Date of Receipt or Postmarked <i>7/28/10</i>

JAL
 PREPARER
 (3/2005)

7/29/10
 DATE PREPARED