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	, p. o co. po. ao
LEAGUE OF CONSERVATION VOTERS ACTION FUND	
(b) Address (number and street)	
1020 2 Stroot 1444 Gaillo GGG	
(c) City, State and ZIP Code	FEC Identification Number
Washington DC 20036	
2. Corporate filers only	C C00252940
Is the filer a qualified nonprofit corporation?	
Individual filers only Name of Employer	Occupation
Traine of Employer	
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report	48-Hour Report
☐ July 15 Quarterly Report	
October Quarterly Report	
☐ January 31 Year-End Report	
(b) Is this Report an amendment? Yes No X	
5. COVERING PERIOD: FROM 09 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
THROUGH	
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
6. TOTAL CONTRIBUTIONS	.00
	00000 00
7. TOTAL INDEPENDENT EXPENDITURES	86806.03
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior or request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. I reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission	In addition, if the independent expenditures
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Barbara McIntosh	09/29/2006
NOTE: Submission of false, erroneous or incomplete information may subject the person signing	
1401 E. Submission or laise, enoneous of incomplete miorifiation may subject the person signing	una report to the perialites of 2 0.3.0 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

5PG021 FEC Schedule 5 (Rev. 09/2005)

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

ME OF FILER (In Full)				FOR LINE 7 FOR FORIVI 3
EAGUE OF CONSERVATION VOTERS AC	CTION FUND			
Full Name (Last, First, Middle Initial) of Payee				I
Winning Connections				Date
				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address 317 Pennsylvania Ave Se				Amount
2nd Fl				296.36
City	State	Zip Code		
Washington	DC	20003		
Purpose of Expenditure		Category/	001	Office Sought: X House State: PA
automated calls		1,700		House Senate District: 07
Name of Federal Candidate Supported or Opposed	J by Expenditure:	:		President
Sestak				Check One: X Support Oppose
Calendar Year-To-Date Per Election				Disbursement For: Primary General
for Office Sought		4367.3	37	Other (specify)
Full Name (Last, First, Middle Initial) of Payee Winning Connections				Date
•				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address 317 Pennsylvania Ave SE				Amount
2nd Fl				296.36
City	State	Zip Code		
Washington	DC	20003		<u>_</u>
Purpose of Expenditure		Category/	001	Office Sought: House State: PA
automated calls		Турс	101	Senate X Senate District:
Name of Federal Candidate Supported or Opposed	J by Expenditure:	:		President —
Casey			1	Check One: X Support Oppose
Calendar Year-To-Date Per Election				Disbursement For: Primary General
for Office Sought		4367.3	35	Other (specify)
Full Name (Last, First, Middle Initial) of Payee				
Winning Connections				Date
				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address 317 Pennsylvania Ave SE				Amount
2n Fl				578.40
City Washington	State DC	Zip Code 20003		
		1		
Purpose of Expenditure automated calls		Category/	001	Office Sought: X House State: NM
		Турс		House Senate District: 01
Name of Federal Candidate Supported or Opposed Madrid	J by Expenditure:	:		President
Mauriu				Check One: X Support Oppose
Calendar Year-To-Date Per Election				Disbursement For: Primary General
for Office Sought		7365.4	14	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditu	ıres			1171.12
,,			•••	
(b) SUBTOTALof Unitemized Independent Expend	ditures			
(c) TOTAL Independent Expenditures				
(carry total from last page forward to Lin	(e /)			

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

Full Name (Last, First, Middle Initial) of Payee		Date			
Custom Paradigm	M M / D D / Y Y Y Y Y Y 2 0 0 6				
Mailing Address					
2990 Vassar Dr		Amount			
City State	Zip Code	2000.00			
Coulder CO	80305				
Purpose of Expenditure	Category/	Office Sought: X House State: NM			
Website creation and hosting	Type 001	House Senate District: 01			
Name of Federal Candidate Supported or Opposed by Expenditure:		President President			
Madrid		Check One: X Support Oppose			
Calendar Year-To-Date Per Election		Disbursement For: Primary General Other (specify)			
for Office Sought	8943.84				
Full Name (Last, First, Middle Initial) of Payee Custom Paradigm		Date			
		0,9 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 101 E 15th St		Amount			
2nd Fl	71.0.1	42069.71			
City State New York NY	Zip Code 10003				
Purpose of Expenditure		Office Sought: House Out MT			
Direct Mail and ID persuasion calls	Category/ Type 001	State: IVI			
Name of Federal Candidate Supported or Opposed by Expenditu		Senate Senate District:			
Tester	ure.	Check One: X Support Oppose			
Calendar Year-To-Date Per Election	21626.18	deneral			
for Office Sought	21020.10	Other (specify)			
Full Name (Last, First, Middle Initial) of Payee		Date			
Burnside & Assoc		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address		0.9 2.8 2.006 Amount			
1311 Tremaine Ave		24218.20			
City State	Zip Code	24210.20			
Los Angeles CA	90019				
Purpose of Expenditure Paid ID calls	Category/	Office Sought: X House State: CA			
	Турс	House Senate District: 11			
Name of Federal Candidate Supported or Opposed by Expenditi Pombo	ure:	President			
Tombo		Check One: Support X Oppose			
Calendar Year-To-Date Per Election		Disbursement For: Primary General			
for Office Sought	2500.00	Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures		68287.91			
(a) SOBTOTAL OF Itemized independent Experiorates					
(b) SUBTOTALof Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
(carry total from last page forward to Line 7)					

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)
LEAGUE OF CONSERVATION VOTERS ACTION FUND

Full Name (Last, First, Middle Initial) of Payee				[Date		
Burnside & Assoc					м м	/ D D /	YYYY
Mailing Address					0 9	28	2006
1311 Tremaine Ave				A	mount		
City	State	Zip Code		\dashv			10204.00
Los Angeles	CA	90019					
Purpose of Expenditure		1		Office S	Sought:	У Ноизо	
paid canvass		Category/ Type	001	Hou		X House	State: CA
Name of Federal Candidate Supported or Opposed b	v Evpanditure			l Hou:	5 C [Senate President	District: 11
Pombo	y ⊏xperiaiture.			Chask		_	0
				Check		Support	X Oppose
Calendar Year-To-Date Per Election				Disburs	ement For:	Primary	General
for Office Sought		2671	8.20	Othe	r (specify)		
Full Name (Last, First, Middle Initial) of Payee				<u> </u>	Date		
Burnside & Assoc				'			
Mailing Address					0.9	[/] 28	2006
Mailing Address 1311 Tremaine Ave				Δ	mount		
	Ctal -	75-0-1		- $ $ $ $			7143.00
City Los Angeles	State CA	Zip Code 90019					• • • • •
	<u> </u>	30019		000	Danieliu		
Purpose of Expenditure paid canvass		Category/	001	Office S		X House	State: <u>CA</u>
·		Туре	001	Hou	se [Senate	District: 11
Name of Federal Candidate Supported or Opposed by Pombo	y Expenditure:	:			L	President	
rumbu				Check	One:	Support	X Oppose
Calendar Year-To-Date Per Election				Disburs	ement For:	Primary	General
for Office Sought		3692	2.20	Othe	r (specify)		
					V 1///		
				Г			170.17.66
(a) SUBTOTAL of Itemized Independent Expenditures	s						17347.00
				Γ			
(b) SUBTOTALof Unitemized Independent Expenditu	ires						
() 				Γ			86806.03
(c) TOTAL Independent Expenditures(carry total from last page forward to Line							
(carry total from last page forward to Line	' /						