

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

RECEIVED
FEDERAL MAIL CENTER
2015 JUN -1 AM 7:06

1. (a) Name of Individual, Organization or Corporation HIGH SCHOOL DEMOCRATS OF AMERICA		3. FEC Identification Number C 00577387
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 4100 NORTH LINCOLN BOULEVARD		
(c) City, State and ZIP Code OKLAHOMA CITY, OKLAHOMA 73105		
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
 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

MM	DD	YYYY
01	01	2015

THROUGH

MM	DD	YYYY
03	31	2015

6. TOTAL CONTRIBUTIONS

0.00

7. TOTAL INDEPENDENT EXPENDITURES

24.00

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

SARAH E. CLAYTON

05/21/2015

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)
HIGH SCHOOL DEMOCRATS OF AMERICA

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

Mailing Address _____

City _____ State _____ Zip Code _____

Date of Receipt / /

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period

Name of Employer _____ Occupation _____

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

Mailing Address _____

City _____ State _____ Zip Code _____

Date of Receipt / /

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period

Name of Employer _____ Occupation _____

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

Mailing Address _____

City _____ State _____ Zip Code _____

Date of Receipt / /

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period

Name of Employer _____ Occupation _____

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

Mailing Address _____

City _____ State _____ Zip Code _____

Date of Receipt / /

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period

Name of Employer **NONE** Occupation **STUDENT**

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page carry total to Line 6) ▶ 0.00

UP-100 (REV. 1-87)

ITEMIZED INDEPENDENT EXPENDITURES

FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
HIGH SCHOOL DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial) of Payee CHASE BANK		Date <input type="text" value="2"/> / <input type="text" value="25"/> / <input type="text" value="2015"/>
Mailing Address 12200 NORTH ROCKWELL AVENUE		Amount <input type="text" value="12.00"/>
City OKLAHOMA CITY, OK 72162	State Zip Code	
Purpose of Expenditure BANK FEE	Category/Type <input type="text" value="ADMIN"/>	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 <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee CHASE BANK		Date <input type="text" value="3"/> / <input type="text" value="24"/> / <input type="text" value="2015"/>
Mailing Address 12200 NORTH ROCKWELL AVENUE		Amount <input type="text" value="12.00"/>
City OKLAHOMA CITY, OK 72162	State Zip Code	
Purpose of Expenditure BANK FEES	Category/Type <input type="text" value="ADMIN"/>	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 <input type="text"/>		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) _____

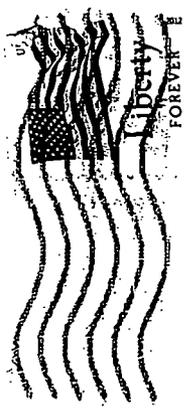
(a) SUBTOTAL of Itemized Independent Expenditures.....	<input type="text" value="24.00"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text" value="0.00"/>
(c) TOTAL Independent Expenditures..... <small>(copy total from last page forward to Line 7)</small>	<input type="text" value="24.00"/>

FROM WIN-ON-10

RYTON
J GENTRY DR
BURN, AZ 36830

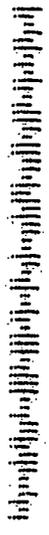
RECEIVED
FEC MAIL CENTER
2015 JUN -1 AM 7:05

WINDY HILLS MOUNTAIN
MONTGOMERY AL 360
26 MAY 2015 PM 3 1



FEDERAL ELECTION COMMISSION
999 E STREET N.W.
WASHINGTON, DC 20463

20463



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

USPS First Class Mail Postmarked
5/26/15 Date of Receipt
6/1/15

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express 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


PREPARER
(3/2015)

6/1/15
DATE PREPARED

1-800-424-9541