

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 The Truth From American Workers		3. FEC Identification Number C C90011958
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 3330 Pinecroft Drive		
(c) City, State and ZIP Code Louisville KY 40219		
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 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

M	M
1	0

 /

D	D
1	8

 /

Y	Y	Y	Y
2	0	1	0

THROUGH

M	M
1	1

 /

D	D
0	2

 /

Y	Y	Y	Y
2	0	1	0

6. TOTAL CONTRIBUTIONS

.00

7. TOTAL INDEPENDENT EXPENDITURES.....

50000.00

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
Larry T. Fox	_____	10/19/2010

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)

The Truth From American Workers

Full Name (Last, First, Middle Initial) of Payee
Media Plus

Date

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
200 South Fifth Street

Amount

50000.00

City State Zip Code
Louisville KY 40202

Purpose of Expenditure
Radio ads

Category/
Type

Office Sought:

House State: KY

Senate

Senate

District: _____

President

Check One:

Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Jack Conway

Calendar Year-To-Date Per Election
for Office Sought

50000.00

Disbursement For:
2010

Primary

General

Other (specify) _____

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

50000.00

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

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

50000.00