Image# 26950419774 08/17/2006 17:44 PAGE **1** / **4** 

## **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)		rganization or Corporation	,		
(a) Name of Individual, Organization or Corporation     DEFENDERS OF WILDLIFE ACTION FUND					
	DEI ENDERS OF WIEDER E ACTION FOND				
	Address (number and 0 17TH STREET N	The state of the s	eviously reported		
(c)	City, State and ZIP Co	ode			
WA	SHINGTON	DC	20036		FEC Identification Number
2. <b>Co</b>	rporate filers only				<b>C</b> C90007907
		Is the filer a qualified nonprofit corpo	oration? X Yes	□ No	
Inc	lividual filers only	Name of Employer	Occupation		
		reality of Employer			
	4. TYPE OF REF	PORT (check appropriate boxes):			
	(a) April 1	5 Quarterly Report	24-Hour Report		Report
	☐ July 15	Quarterly Report			
	Octobe	r Quarterly Report			
	Januar	y 31 Year-End Report			
	(b) Is this Report an amendment? Yes \( \subseteq \text{No } \overline{X} \)				
	5. COVERING PERIOD: FROM M M / D D / Y Y Y Y				
		THRO	UGH		
		M M / D I	) / Y Y Y Y		
	6. TOTAL CONT	RIBUTIONS			.00
	7 TOTAL INDEE	PENDENT EXPENDITURES			22001.00
	/. TOTAL INDER	LINDLINI EXI ENDITOTIES			
					75 F 20 14
request	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
Anne	Saer				08/17/2006
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C 437g.					
	NOTE. SUDITIISSIC	ni oriaise, erroneous or incomplete informa	mon may subject the person Si	grinig triis report to	o the penalues of 2 0.3.0 43/g.

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)

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)					
DEFENDERS OF WILDLIFE ACTION FUND					
Full Name (Last, First, Middle Initial) of Payee	Date				
Mailing Address 555 Peters Ave	M M / D D / Y Y Y Y Y Y Y A Y A Y A Amount				
City State Zip Code	6500.00				
Pleasanton CA 94566					
Purpose of Expenditure August Consultant Fee  Category/ Type 001	Office Sought: X House State: CA House Senate				
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Pombo	Check One:  District: 11  President  Support  X  Oppose				
Calendar Year-To-Date Per Election for Office Sought .00	Disbursement For: Primary General  Other (specify)				
Full Name (Last, First, Middle Initial) of Payee	Date				
Mailing Address 555 Peters Ave	M M / D D / Y Y Y Y Y A Amount				
City State Zip Code Pleasanton CA 94566	500.00				
Purpose of Evpanditure	Office Sought: Y House CA				
Travel/supplies/food Category/ Type 002	House Senate				
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Pombo	Check One: Support X Oppose				
Calendar Year-To-Date Per Election for Office Sought .00	Disbursement For: Primary General  Other (specify)				
Full Name (Last, First, Middle Initial) of Payee	Date				
	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
Mailing Address 555 Peters Street	Amount				
City State Zip Code Pleasanton CA 94566	4473.00				
Purpose of Expenditure Consultant Fee Category/ Type 001	Office Sought: X House State: CA House Senate				
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 11				
Richard Pombo	Check One: Support X Oppose				
Calendar Year-To-Date Per Election for Office Sought .00	Disbursement For: Primary General Other (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures	11473.00				
(b) SUBTOTALof Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)					
DEFENDERS OF WILDLIFE ACTION FUND					
Full Name (Last, First, Middle Initial) of Payee		l pur			
Verizon Wireless		Date			
Mailing Address					
PO. Box 96088		Amount			
City State	Zip Code	960.00			
Bellevue WA	98009				
Purpose of Expenditure	Category/	Office Sought: X House State: CA			
Cell phone contract	Type 001	House Senate			
Name of Federal Candidate Supported or Opposed by Expenditure:	<u> </u>	President District: 11			
Richard Pombo					
Calendar Year-To-Date Per Election		Disbursement For: Primary General			
for Office Sought	.00	Other (specify)			
Full Name (Last, First, Middle Initial) of Payee					
Common Knowledge		Date			
<u> </u>		0 8 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address		Amount			
1388 Sutter Street					
City State	Zip Code	2500.00			
San Francisco CA	94109				
Purpose of Expenditure	Category/	Office Sought: X House State: CA			
Web site design	Type 001	House Senate			
Name of Federal Candidate Supported or Opposed by Expenditure:		President District: 11			
Richard Pombo					
Calendar Year-To-Date Per Election		Disbursement For: Primary General			
for Office Sought	.00	Other (specify)			
Full Name (Last, First, Middle Initial) of Payee		Deta			
		Date			
		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
Mailing Address 1130 17th Street		Amount			
1130 17(II Street					
City State	Zip Code	1775.00			
Washington DC	20036				
Purpose of Expenditure	Category/	Office Sought: X House State: CA			
Salary	Type 001	House Senate			
Name of Federal Candidate Supported or Opposed by Expenditure:	!	President District: 11			
Richard Pombo		Check One: Support X Oppose			
Calendar Year-To-Date Per Election	20	Disbursement For: Primary General			
for Office Sought	.00	Other (specify)			
I .					
(a) SUBTOTAL of Itemized Independent Expenditures		5235.00			
(-,					
(b) SUBTOTALof Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
(carry total from last page forward to Line 7)					

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ITEMIZED INDEPENDENT EXPENDITU	IRES				FOR LINE 7	FOR FORM 5
NAME OF FILER (In Full)						
DEFENDERS OF WILDLIFE ACTION FL	IND					
Full Name (Last First Middle Initial) of Davis				<u> </u>		
Full Name (Last, First, Middle Initial) of Payee				Date		
				ММ	/ D D /	2006
Mailing Address				0.8	1 7	2006
1509 Holly Street				Amount		
City	State	Zip Code				4816.00
Austin	TX	78702				
Purpose of Expenditure		la		Office Sought:		0.4
Consultant Fee		Category/ Type	001	- 4	<ul><li>✓ House</li></ul>	State: <u>CA</u>
				House	Senate	District: 11
Name of Federal Candidate Supported or Opp	osed by Expenditure:			L	_ President	
Richard Pombo				Check One:	Support	X Oppose
				Disbursement For:	Primary	General
Calendar Year-To-Date Per Election			.00	Other (area;tr)	_ ,	_
for Office Sought		• • •		Other (specify)		
Full Name (Last, First, Middle Initial) of Payee				Date		
				мм	/ D D /	Y Y Y Y
Mailing Address				0,3	08	2006
1130 17th Street				Amount		
City	State	Zip Code				477.00
City Washington	DC	20036				
		1				
Purpose of Expenditure		Category/	001	Office Sought:	House	State: CA
Salary		Туре	001	House	Senate	District: 11
Name of Federal Candidate Supported or Opp	osed by Expenditure:	•		L	President	District:
Richard Pombo				Check One:	Support	X Oppose
				Disbursement For:	Primary	General
Calendar Year-To-Date Per Election			.00			Goriora
for Office Sought				Other (specify)		
(a) SURTOTAL of Itemized Independent Expenditures 5293.00						
(a) SUBTOTAL of Itemized Independent Expenditures						
(b) CUPTOTAL of United States and and Europe distance						
(b) SUBTOTALof Unitemized Independent Expenditures						
(a) TOTAL Independent Figure 11:						22001.00
(c) TOTAL Independent Expenditures						

(carry total from last page forward to Line 7)