

# 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 Working America		3. FEC Identification Number <b>C</b> C90011156
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 815 16th St NW		
(c) City, State and ZIP Code Washington DC 20006		
2. <b>Corporate filers only</b>	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Individual filers only</b>	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
0	9

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	1	0

THROUGH

M	M
0	9

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	1	0

6. TOTAL CONTRIBUTIONS ..... 

0.00
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7. TOTAL INDEPENDENT EXPENDITURES..... 

1448.60
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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**

Jeff Prior

09/17/2010

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)

Working America

Full Name (Last, First, Middle Initial) of Payee  
Amber Crosby

Date

M M / D D / Y Y Y Y  
0 9 / 1 6 / 2 0 1 0

Mailing Address  
5268 Knollwood Avenue Apt 1

Amount

62.83

City State Zip Code  
Parma OH 44129

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 251.32

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Robert Gruss

Date

M M / D D / Y Y Y Y  
0 9 / 1 6 / 2 0 1 0

Mailing Address  
1534 Belle Ave

Amount

67.65

City State Zip Code  
Lakewood OH 44107

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 270.60

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Rivon Hackett

Date

M M / D D / Y Y Y Y  
0 9 / 1 6 / 2 0 1 0

Mailing Address  
12050 Lake Ave

Amount

62.83

City State Zip Code  
Lakewood OH 44107

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 251.32

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

193.31

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

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

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee  
James Hewitt

Date

M M / D D / Y Y Y Y  
09 / 16 / 2010

Mailing Address  
2140 West 29th St

Amount

95.42

City State Zip Code  
Cleveland OH 44113

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 286.26

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Ryan Hobson

Date

M M / D D / Y Y Y Y  
09 / 16 / 2010

Mailing Address  
5702 Bridge Ave Apt1

Amount

67.65

City State Zip Code  
Cleveland OH 44102

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 270.60

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Niles Hooks

Date

M M / D D / Y Y Y Y  
09 / 16 / 2010

Mailing Address  
3555 East 142nd St

Amount

62.83

City State Zip Code  
Cleveland OH 44120

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 251.32

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

225.90

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

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

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee  
Nicholas Jarrell

Date

M M / D D / Y Y Y Y  
0 9 / 1 6 / 2 0 1 0

Mailing Address  
3414 Gina Drive

Amount

62.83

City State Zip Code  
North Ridgeville OH 44039

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH

House  Senate District: 13

President

Check One:  Support  Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Calendar Year-To-Date Per Election  
for Office Sought 251.32

Disbursement For:  Primary  General

2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Cynthia Jenkins

Date

M M / D D / Y Y Y Y  
0 9 / 1 6 / 2 0 1 0

Mailing Address  
5810 State St 20, Lot 91

Amount

62.83

City State Zip Code  
Wakeman OH 44889

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH

House  Senate District: 13

President

Check One:  Support  Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Calendar Year-To-Date Per Election  
for Office Sought 251.32

Disbursement For:  Primary  General

2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Jeremy Johnston

Date

M M / D D / Y Y Y Y  
0 9 / 1 6 / 2 0 1 0

Mailing Address  
2529 Chesterland

Amount

96.43

City State Zip Code  
Lakewood OH 44107

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH

House  Senate District: 13

President

Check One:  Support  Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Calendar Year-To-Date Per Election  
for Office Sought 385.72

Disbursement For:  Primary  General

2010  
 Other (specify)

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

222.09

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

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

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee  
Dominique Jordan

Date

M M / D D / Y Y Y Y  
09 / 16 / 2010

Mailing Address  
1752 Lee Road

Amount

88.26

City State Zip Code  
Cleveland Heights OH 44118

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 353.04

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Stephen Karbowskiak

Date

M M / D D / Y Y Y Y  
09 / 16 / 2010

Mailing Address  
4195 West 22nd St Down

Amount

88.26

City State Zip Code  
Cleveland OH 44109

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 353.04

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Raymond Leiden

Date

M M / D D / Y Y Y Y  
09 / 16 / 2010

Mailing Address  
3103 Walton Ave

Amount

62.83

City State Zip Code  
Cleveland OH 44113

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 188.49

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

239.35

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

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

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee  
Drew Maziasz

Date

M M / D D / Y Y Y Y  
0 9 / 1 6 / 2 0 1 0

Mailing Address  
567 Red Oak Lane

Amount

62.83

City State Zip Code  
Bay Village OH 44140

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 251.32

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Michael McMahon

Date

M M / D D / Y Y Y Y  
0 9 / 1 6 / 2 0 1 0

Mailing Address  
3470 Villa Casa Ct

Amount

88.26

City State Zip Code  
Brunswick OH 44212

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 353.04

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Matthew McNamara

Date

M M / D D / Y Y Y Y  
0 9 / 1 6 / 2 0 1 0

Mailing Address  
2160 North St James Pkwy

Amount

62.83

City State Zip Code  
Cleveland Heights OH 44106

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 188.49

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

213.92

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

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

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee  
Soren Norris

Date

M M / D D / Y Y Y Y  
09 / 16 / 2010

Mailing Address  
1510 Elmwood

Amount

67.65

City State Zip Code  
Lakewood OH 44107

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 270.60

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Daniel O'Malley

Date

M M / D D / Y Y Y Y  
09 / 16 / 2010

Mailing Address  
23724 Cliff Dr

Amount

109.09

City State Zip Code  
Bay Village OH 44140

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 436.36

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Katherine Segrue

Date

M M / D D / Y Y Y Y  
09 / 16 / 2010

Mailing Address  
1929 Mayview Ave

Amount

62.83

City State Zip Code  
Cleveland OH 44109

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 251.32

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

239.57

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

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

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee  
Thrifty

Date

M M / D D / Y Y Y Y  
09 / 16 / 2010

Mailing Address  
19727 Maplewood Ave

Amount

26.03

City State Zip Code  
Cleveland OH 44135

Purpose of Expenditure  
Car rental

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 197.67

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Thrifty

Date

M M / D D / Y Y Y Y  
09 / 16 / 2010

Mailing Address  
19727 Maplewood Ave

Amount

25.60

City State Zip Code  
Cleveland OH 44135

Purpose of Expenditure  
Car rental

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 223.27

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Carmella Vernon

Date

M M / D D / Y Y Y Y  
09 / 16 / 2010

Mailing Address  
1392 East 187th St Down

Amount

62.83

City State Zip Code  
Cleveland OH 44110

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: OH  
 Senate District: 13  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
BETTY S. MS. SUTTON

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 251.32

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

114.46

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

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

1448.60