

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 Education Voters Political Account		3. FEC Identification Number C
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 11 Dupont Circle NW Ste. 201		
(c) City, State and ZIP Code Washington, D.C. 20036		
2. Corporate filers only Is the filer a qualified nonprofit corporation? <input checked="" 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
 24-Hour Report
 October 15 Quarterly Report
 January 31 Year-End Report 48-Hour Report

b) Is this Report an amendment? Yes No

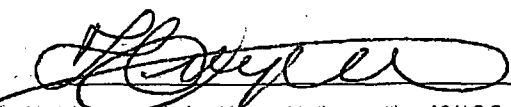
5. COVERING PERIOD: FROM

10 26 2010
THROUGH
10 27 2010

6. TOTAL CONTRIBUTIONS **0.00**

7. TOTAL INDEPENDENT EXPENDITURES **19,962.00**

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
Herlyth Clark		10/27/2010

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.
HERLYTH CLARK

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)

Education Voters Political Account

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

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

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SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Education Voters Political Account

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

B 101 Radio station

Date

10 / 26 / 2010

Mailing Address

225 E City Avenue

Amount

7,980.00

City

Bala Cynwyd

State

PA

Zip Code

19004

Purpose of Expenditure

Radio Ad

Category/
Type

Office Sought:

House

Senate

President

State: PA

District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

Joe Sestak

Check One:

Support

Oppose

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

Primary

General
2010

Other (specify) _____

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

Kennedy Printing Company, Inc

Date

10 / 26 / 2010

Mailing Address

5534 Baltimore Avenue

Amount

5,982.00

City

Philadelphia, PA

State

PA

Zip Code

19143

Purpose of Expenditure

Postcards Mailing + Postage

Category/
Type

Office Sought:

House

Senate

President

State: PA

District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

Joe Sestak

Check One:

Support

Oppose

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

Primary

General
2010

Other (specify) _____

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

Zata-3 Consulting, LLC

Date

MM / DD / YYYY

Mailing Address

458 New Jersey Ave. SE

Amount

6,000.00

City

Washington, D.C.

State

D.C.

Zip Code

20003

Purpose of Expenditure

Household call Setup/data/script

Category/
Type

Office Sought:

House

Senate

President

State: PA

District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

Joe Sestak

Check One:

Support

Oppose

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

Primary

General
2010

Other (specify) _____

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

19,962.00

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

0.00

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

19,962.00

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.

N/A
PREPARER

N/A
DATE PREPARED