Image# 28990535861 03/03/2008 23:38

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	1						
	owerPac.org							
	b) Address (number and street)							
	or opear of outer 1000							
(c) City, State and ZIP Code							
S	an Francisco CA 94105	FEC Identification Number						
2. (Corporate filers only	C C90009853						
- `	Is the filer a qualified nonprofit corporation?							
	Individual filers only Name of Employer							
	Name of Employer	Occupation						
	4. TYPE OF REPORT (check appropriate boxes):							
	(a) April 15 Quarterly Report	Notice						
	☐ July 15 Quarterly Report							
	☐ October Quarterly Report							
	January 31 Year-End Report							
	(b) Is this Report an amendment? Yes \(\subseteq\) No \(\overline{X}\)							
	5. COVERING PERIOD: FROM 02 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
	THROUGH							
	02 / 29 / Y Y Y Y Y Y							
	6. TOTAL CONTRIBUTIONS	0.00						
	7. TOTAL INDEPENDENT EXPENDITURES	125099.05						
Unde	r penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or est or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if	in constitution with, or at the						
	ted herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulation.							
TYF	PE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE						
l ie	a V Le	03/01/2008						
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

Image# 28990535862 SCHEDULE 5-E

PAGE 2/2
FOR LINE 7 FOR FORM 5

TEMIZED INDEPENDENT EXPENDITU	JRES				FOR LINE	7 FOR FORM 5			
NAME OF FILER (In Full)									
PowerPac.org									
Full Name (Last, First, Middle Initial) of Payee				1					
The Archer Group				Date					
•	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$								
Mailing Address	Amount	2.5	2000						
P.O. Box 291173	Amount								
City	State	Zip Code				125099.05			
San Antonio	TX	78229							
Purpose of Expenditure		Category/		Office Sought:	House	State: TX			
Direct mailers		Type		Presidential	Senate	State:			
Name of Federal Candidate Supported or Opp	osed by Evnenditure:				X President	District:			
Barack Obama	DOCCI DY Experientare.			Check One:	X Support	Oppose			
Calendar Year-To-Date Per Election				Disbursement For: 2008	X Primary	General			
for Office Sought		50632	1.08	Other (specify)					
		,	05000.05						
(a) SUBTOTAL of Itemized Independent Expe		1.	25099.05						
(b) SUBTOTALof Unitemized Independent Ex									
		125099.05							
(c) TOTAL Independent Expenditures				1	I	_0000.00			

(carry total from last page forward to Line 7)