Image# 10931775864 107/29#2010 20:38

## **FEC FORM 5**

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

(a) Name of Individual, Organization or Corporation	
AMERICA VOTES	
AWERICA VOTES	
(b) Address (number and street)	
(c) City, State and ZIP Code	
WASHINGTON DC 20005	3. FEC Identification Number
2. Corporate filers only	<b>C</b> C90012097
Is the filer a qualified nonprofit corporation?	
Individual filers only Name of Employer	
Name of Employer	Occupation
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 \( \square\) No \( \textbf{X} \)	
5. COVERING PERIOD: FROM M, M / DD D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
THROUGH	
M 1 0 / D 2 8 / Y 2 0 1 0 Y	
6. TOTAL CONTRIBUTIONS	.00
7. TOTAL INDEPENDENT EXPENDITURES	4544.00
7. TOTAL INDEPENDENT EXPENDITURES	TOTT.00
•	
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or i 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 I reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulation	the independent expenditures
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Susan Finkle	10/29/2010
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to	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

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full) **AMERICA VOTES** Full Name (Last, First, Middle Initial) of Payee Date Zata 3 Ý 0 1 0 Y 2 <sup>D</sup> Mailing Address Amount 458 New Jersey Ave SE 2031.20 State Zip Code DC 20003 Washington Purpose of Expenditure Office Sought: Category/ χ House State: IL Phone Calls Type House Senate District: \_14 President Name of Federal Candidate Supported or Opposed by Expenditure: Bill Foster Support Oppose Check One: Disbursement For: X General Primary Calendar Year-To-Date Per Election 2010 5274.40 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Zata 3 2010 Mailing Address Amount 458 New Jersey Ave SE 2512.80 Zip Code City State Washington DC 20003 Purpose of Expenditure Office Sought: χ House State: IL Category/ Phone Calls Туре House Senate District: 10 President Name of Federal Candidate Supported or Opposed by Expenditure: Dan Seals Check One: χ Support Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2010 6182.40 for Office Sought Other (specify) 4544.00 (a) SUBTOTAL of Itemized Independent Expenditures ...... (b) SUBTOTALof Unitemized Independent Expenditures..... 4544.00 (c) TOTAL Independent Expenditures .....

(carry total from last page forward to Line 7)