Image# 10931774939 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 NH Citizens Alliance for Action	
	_
 (b) Address (number and street) Check if different than previously reported 4 Park Street, Suite 304 	
(c) City, State and ZIP Code	3. FEC Identification Number
Concord NH 03301	
2. Corporate filers only Is the filer a qualified nonprofit corporation? X Yes No	C C90011933
Individual filers only 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 \Box No \overline{X}	
5. COVERING PERIOD: FROM 1.0 / 2.8 / Y.Y.Y.	
THROUGH	
6. TOTAL CONTRIBUTIONS	.00
7. TOTAL INDEPENDENT EXPENDITURES	4788.02
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, it reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulation	
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Larry Converse	10/29/2010
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

Image# 10931774940 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

NH Citizens Alliance for Action

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Full Name (Last, First, Middle Initial) of Payee				Date
Andrew Lamer				M M / D D / Y Y Y Y 10 28 2010
Mailing Address				
314 Route 153				Amount
City	State	Zip Code		279.16
Middleton	NH	03887		
Purpose of Expenditure		Category/		Office Sought: X House State: NH
Canvasser salary		Type		House Senate
Name of Federal Candidate Supported or Opp	osed by Expenditure:	<u> </u>		President District: 01
Carol Shea-Porter				Check One: X Support Oppose
Calendar Year-To-Date Per Election		0	20	Disbursement For: Primary X General
for Office Sought		.0		Other (specify)
Full Name (Last, First, Middle Initial) of Payee			I	Date
Lynn Meleady				
Mailing Address				$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
17 Portland #6				Amount
City	State	Zip Code		197.01
City Dover	NH	2ip Code 03820		
Purpose of Expenditure				Office Sought: V House out NH
Canvasser salary		Category/ Type		
-				House Senate District: 01
Name of Federal Candidate Supported or Opp Carol Shea-Porter	osed by Expenditure:			President
Carol Sheart often				Check One: X Support Oppose
Calendar Year-To-Date Per Election				Disbursement For: Primary X General
for Office Sought		.0	00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee				
Tim McClay				Date
-				$- 10^{M} 29^{V} 2010^{V}$
Mailing Address 4B Rita Street				Amount
				78.00
City	State	Zip Code		
Somersworth	NH	03878	i	
Purpose of Expenditure		Category/		Office Sought: X House State: NH
Canvasser salary		Туре		House Senate District: 01
Name of Federal Candidate Supported or Opp	osed by Expenditure:	•		President
Carol Shea-Porter				Check One: X Support Oppose
				Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought		.0	00	2010 Other (specify)
Tor Office Cought				
				554.17
(a) SUBTOTAL of Itemized Independent Expe	nditures			
(b) CLIDTOTAL of Linitamized Independent Fu	nonditures			
(b) SUBTOTAL of Unitemized Independent Ex	penultures			
(c) TOTAL Independent Expenditures				
(carry total from last page forward t				

Image# 10931774941 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

NH Citizens Alliance for Action

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Full Name (Last, First, Middle Initial) of Payee		Date
Patrick Gale		M M / D D / Y Y Y Y 10 28 2010
Mailing Address		
53 South Street		Amount
City State	Zip Code	451.75
Rollinsford NH	03864	
Purpose of Expenditure	Category/	Office Sought: X House State: NH
Canvasser salary	Туре	House Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure:		President
Carol Shea-Porter		Check One: X Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General
for Office Sought	.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Jameson Small		M M / D D / Y Y Y Y
Mailing Address		10292010 Amount
53 Willey Street		592.77
City State	Zip Code	392.11
Rollinsford NH	03869	
Purpose of Expenditure	Category/	Office Sought: X House State: NH
Canvasser salary	Туре	House Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: Carol Shea-Porter		
		Check One: X Support Oppose
Calendar Year-To-Date Per Election	.00	Disbursement For: Primary X General
for Office Sought	.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Jennifer Hall		$ \begin{array}{c c} \mathbf{M} & \mathbf{M} \\ 1 & 0 \end{array} \\ 0 \end{array} \\ 2 \\ 8 \end{array} \\ 2 \\ 0 \\ 1 \\ 0 \\ 1 \\ 0 \end{array} $
Mailing Address		Amount 28 2010
48 Fourth Street #4		
City State	Zip Code	165.75
Dover NH	03820	
Purpose of Expenditure	Category/	Office Sought: X House State: NH
Canvasser salary	Туре	House Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: Carol Shea-Porter		
		Check One: X Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General 2010
for Office Sought	.00	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		1210.27
(b) SUBTOTAL of Unitemized Independent Expenditures		·
(c) TOTAL Independent Expenditures		

Image# 10931774942 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

NH Citizens Alliance for Action

Full Name (Last, First, Middle Initial) of Payee		Date
Nathan Ashton		M M / D D / Y Y Y Y 1,0 28 2010
Mailing Address		1.0 2.8 2.010 Amount
235 Central Avenue #5		100.75
City State	Zip Code	100.75
Dover NH	03820	
Purpose of Expenditure Canvasser salary	Category/	Office Sought: X House State: NH
	Туре	House Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: Carol Shea-Porter		President
		Check One: X Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General
for Office Sought	.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
David Herman		M M / D D / Y Y Y Y
Mailing Address		
46 Hansonville Road		Amount
City State	Zip Code	256.99
Rochester NH	03839	
Purpose of Expenditure	Category/	Office Sought: X House State: NH
Canvasser salary	Туре	House Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure:		President
Carol Shea-Porter		Check One: X Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General
for Office Sought	.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	I	Date
Marrion Herman		
Mailing Address		$- 10^{\circ} / 28^{\circ} / 2010^{\circ}$
46 Hansonville Street		Amount
City State	Zip Code	217.75
Rochester NH	03839	
Purpose of Expenditure	Category/	Office Sought: X House State: NH
Canvasser salary	Type	House Senate
Name of Federal Candidate Supported or Opposed by Expenditure:	!	President District: 01
Carol Shea-Porter		Check One: X Support Oppose
		Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	.00	2010
(a) SUBTOTAL of Itomized Independent Expanditures		575.49
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
(carry total from last page forward to Line 7)		

Image# 10931774943 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

NH Citizens Alliance for Action

FOR LINE 7 FOR FORM 5

Full Name (Last, First, Middle Initial) of Payee	Date
Mikel Jacobson	M M / D D / Y Y Y Y 10 28 2010
Mailing Address	
12 Willey Street	Amount
City State Zip Cod	le 117.00
Rollinsford NH 03869	
Purpose of Expenditure Category/	Office Sought: X House State: NH
Canvasser salary Type	House Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure:	
Carol Shea-Porter	Check One: X Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary X General
for Office Sought	.00 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Tracy Rusch	M M / D D / Y Y Y Y 10 / 28 / 2010
Mailing Address	Amount
5 Brockett Point	70.47
City State Zip Cod	
Greenland NH 03840	
Purpose of Expenditure Category/ Canvasser salary Type	Office Sought: X House State: NH
, , , , , , , , , , , , , , , , , , , ,	House Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: Carol Shea-Porter	
	Check One: X Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary X General
for Office Sought	.00 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Jonathan Tauscher	$\begin{array}{c c} \mathbf{M} & \mathbf{M} \\ 1 & 0 \end{array} \begin{array}{c} \mathbf{D} & \mathbf{D} \\ 28 \end{array} \begin{array}{c} \mathbf{Y} & \mathbf{Y} & \mathbf{Y} \\ 2010 \end{array}$
Mailing Address	
11 Northside Road	Amount
City State Zip Cod	le 58.50
Lee NH 03861	
Purpose of Expenditure Category/	Office Sought: X House State: NH
Canvasser salary Type	House Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: Carol Shea-Porter	
	Check One: X Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary X General
for Office Sought	.00 Other (specify)
(a) SUDTOTAL of Itomized Independent Funerality	245.97
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Lifte 7)	

Image# 10931774944 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

NH Citizens Alliance for Action

FOR LIN	E 7 FOR	FORM 5

Full Name (Last, First, Middle Initial) of Payee		Date
Roosevelt Cox		M M / D D / Y Y Y Y 10 28 2010
Mailing Address 358 Winding Pond Road		Amount
City State	Zip Code	300.38
Londonderry NH	03053	
Purpose of Expenditure	Category/	Office Sought: X House State: NH
Canvasser salary	Туре	House
Name of Federal Candidate Supported or Opposed by Expenditure	• :	President District: 01
Carol Shea-Porter		Check One: X Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General
for Office Sought	.00	2010
Full Name (Last, First, Middle Initial) of Payee		Date
Judi Matthews		M M / D D / Y Y Y Y 10 28 2010
Mailing Address		Amount
P.O. Box 1084		45.50
City State Portsmouth NH	Zip Code 03802	+0.00
Purpose of Expenditure	03002	
Canvasser salary	Category/ Type	Office Sought: X House State: NH
-		House Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: Carol Shea-Porter		Check One: X Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General
for Office Sought	.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
James White		
Mailing Address		$\underbrace{\begin{array}{c} \begin{array}{c} M & M \\ 1 & 0 \end{array}}_{n} \begin{pmatrix} D & D \\ 2 & 8 \end{pmatrix}} \begin{pmatrix} Y & Y \\ 2 & 0 & 1 \\ 0 \end{pmatrix} \begin{pmatrix} Y \\ 2 & 0 & 1 \\ 0 \end{pmatrix}}$
17 Portland Avenue		Amount
City State	Zip Code	396.50
Dover NH	03820	
Purpose of Expenditure	Category/	Office Sought: X House State: NH
Canvasser salary	Туре	House Senate
Name of Federal Candidate Supported or Opposed by Expenditure		President District: 01
Carol Shea-Porter		Check One: X Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General
for Office Sought	.00	2010
		742.38
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
· · · · · · · · · · · · · · · · · · /		

Image# 10931774945 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

NH Citizens Alliance for Action

PAGE 7/9

Full Name (Last, First, Middle Initial) of Payee	Date
Doug Bogen	M M / D D / Y Y Y Y
Mailing Address	
21 Lois Lane	Amount
City State	Zip Code 509.57
	03825
Purpose of Expenditure	egory/ Office Sought: X House State: NH
	Type House Senate
Name of Federal Candidate Supported or Opposed by Expenditure:	District: 01
Carol Shea-Porter	Check One: X Support Oppose
Calendar Year-To-Date Per Election	2010 2010 2010
for Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Samuel Ueda	M M / D D / Y Y Y Y
Mailing Address	
37 Woods Run	Amount
City State	Zip Code 81.25
	03869
Purpose of Expenditure	egory/ Office Sought: Y House Chater NH
Name of Federal Candidate Supported or Opposed by Expenditure:	House Senate District: 01
Carol Shea-Porter	
Calendar Year-To-Date Per Election	Disbursement For: Primary X General
for Office Sought	.00 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Christine Trayner	
Mailing Address	
15 Long Hill Road	Amount
-	Zip Code 45.50
•	03885
Burness of Evenenditure	
Gai	
	District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: Carol Shea-Porter	President
	Check One: X Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary X General
for Office Sought	.00 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	636.32
(b) SUBTOTALof Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Line 7)	

Image# 10931774946 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

NH Citizens Alliance for Action

	FOR	LINE	7	FOR	FORM 5
--	-----	------	---	-----	--------

Full Name (Last, First, Middle Initial) of Payee	Date
Richard Smith	M M / D D / Y Y Y Y 10 28 2010
Mailing Address 93 High Street #1	1 0 2 8 2 0 1 0 Amount
City State Zip Code	247.87
Portsmouth NH 03801	
Purpose of Expenditure Category/	Office Sought: X House State: NH
Canvasser salary Type	House Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: Carol Shea-Porter	Check One: X Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary X General
for Office Sought	.00
Full Name (Last, First, Middle Initial) of Payee Erik Swanson	Date
	10 ^M 4 ^D 28 ^J 2010 ^V
Mailing Address 4 Love Lane	Amount
City State Zip Code	333.72
Kittery ME 03904	
Purpose of Expenditure Category/	Office Sought: X House State: NH
Canvasser salary Type	House Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Carol Shea-Porter	Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought	.00 Disbursement For: Primary X General 2010 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	
Emily Heckel	$\begin{array}{c c} M & M \\ 1 & 0 \end{array} \\ \end{array} $
Mailing Address 2 Hale Farm Road	Amount
City State Zip Code	e 196.33
Lee NH 03861	
Purpose of Expenditure Category/	Office Sought: X House State: NH
Canvasser salary Type	House Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: Carol Shea-Porter	Check One: X Support Oppose
	Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	.00 2010 2010 2010
(a) SUBTOTAL of Itemized Independent Expenditures	777.92
(b) SUBTOTALof Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Image# 10931774947 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

FOR LIN	E 7 FOR	FORM 5

NH Citizens Alliance for Action	
Full Name (Last, First, Middle Initial) of Payee Wendy Greenleaf	Date
Mailing Address P.O. Box 669	M M / D D / Y
CityStateZip CodeManchesterNH03105	45.50
Purpose of Expenditure Category/ Canvasser salary Type	Office Sought: X House State: NH House Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: Carol Shea-Porter	District: 01 District: 01 Oppose 0
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary X General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	45.50
(b) SUBTOTALof Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	4788.02