09%27#210/120 17:07

Image# 10931347942 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	
THE 60 PLUS ASSOCIATION, Inc.	
(b) Address (number and street) Check if different than previously reported 515 KING STREET SUITE 315	
(c) City, State and ZIP Code	0. FEO literi'i's sting Number
ALEXANDRIA VA 22314	3. FEC Identification Number
2. Corporate filers only	C C90011685
Is the filer a qualified nonprofit corporation?	
Individual filers only Name of Employer	Occupation
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report 24-Hour Notice X 48-Hour	ır Notice
July 15 Quarterly Report	
October Quarterly Report	
January 31 Year-End Report	
(b) Is this Report an amendment? Yes No X	
5. COVERING PERIOD: FROM 09 / 25 / Y Y Y	
THROUGH	
6. TOTAL CONTRIBUTIONS	.00
7. TOTAL INDEPENDENT EXPENDITURES	13105.83
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, reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulation.	if the independent expenditures
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Amy Frederick	09/27/2010
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this repo	rt 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# 10931347943 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

N

		FOR LINE / FOR FORM 5
AME OF FILER (In Full)		
THE 60 PLUS ASSOCIATION, Inc.		
Full Name (Last, First, Middle Initial) of Payee		Deta
Mentzer Media Services, Inc.		Date
		$\begin{array}{c c} & M & M \\ 0.9 \end{array} \begin{array}{c} / & D & D \\ 2.5 \end{array} \begin{array}{c} / & Y & Y \\ 2.010 \end{array}$
Mailing Address		Amount
600 Fairmont Ave., Suite 306		
City State	Zip Code	13105.83
Towson MD	21286	
Purpose of Expenditure	Catagory	Office Sought: X House State: PA
TV/Media Production	Category/ Type	State: <u>177</u>
		House Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Kathy Dahlkemper		
Ratity Dankemper		Check One: Support X Oppose
Oslander Verr To Date Day Election		Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	215956.44	2010 Contract Contract

(a)	(a) SUBTOTAL of Itemized Independent Expenditures	

13105.83

13105.83

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

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