

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 DEFENDERS OF WILDLIFE ACTION FUND | | 3. FEC Identification Number C C90007907 |
| (b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1130 17TH ST NW | | |
| (c) City, State and ZIP Code WASHINGTON DC 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 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 No

5. COVERING PERIOD: FROM

| | |
|---|---|
| M | M |
| 0 | 8 |

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| | |
|---|---|
| D | D |
| 3 | 0 |

 /

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|---|---|---|---|
| Y | Y | Y | Y |
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THROUGH

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|---|---|
| D | D |
| 0 | 4 |

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| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

6. TOTAL CONTRIBUTIONS

| |
|-----|
| .00 |
|-----|

7. TOTAL INDEPENDENT EXPENDITURES.....

| |
|--------|
| 638.36 |
|--------|

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, 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 |
| William Lutz | | 09/05/2008 |

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

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Enterprise Rent a Car

Date

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 0 8

Mailing Address
7833 Lomas NE

Amount

533.61

City State Zip Code
Albuquerque NM 87110

Purpose of Expenditure
van rental

Category/
Type

Office Sought: House State: NM
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Steve Pearce

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2883.61

Disbursement For: Primary General
2008
 Other (specify) _____

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

Date

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 0 8

Mailing Address
PO Box 660618

Amount

18.31

City State Zip Code
Dallas TX 75266

Purpose of Expenditure
internet bill

Category/
Type

Office Sought: House State: NM
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Steve Pearce

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 579.59

Disbursement For: Primary General
2008
 Other (specify) _____

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

Date

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 0 8

Mailing Address
204 Valencia Dr NE

Amount

4.09

City State Zip Code
Albuquerque NM 87108

Purpose of Expenditure
mileage

Category/
Type

Office Sought: House State: NM
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Steve Pearce

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2425.77

Disbursement For: Primary General
2008
 Other (specify) _____

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

556.01

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

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

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

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

Date

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 0 8

Mailing Address
6001 Menaul Blvd NE

Amount

9.60

City State Zip Code
Albuquerque NM 87113

Purpose of Expenditure
supplies

Category/
Type

Office Sought: House State: NM
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Steve Pearce

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 287.18

Disbursement For: Primary General
2008
 Other (specify) _____

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

Date

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 0 8

Mailing Address
1600 San Pedro Blvd NE

Amount

51.12

City State Zip Code
Albuquerque NM 87102

Purpose of Expenditure
mileage

Category/
Type

Office Sought: House State: NM
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Steve Pearce

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 5777.13

Disbursement For: Primary General
2008
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Mario's Restaurant

Date

M M / D D / Y Y Y Y
0 9 / 0 4 / 2 0 0 8

Mailing Address
2401 San Pedro Blvd NE

Amount

17.54

City State Zip Code
Albuquerque NM

Purpose of Expenditure
volunteer food

Category/
Type

Office Sought: House State: NM
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Steve Pearce

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 426.92

Disbursement For: Primary General
2008
 Other (specify) _____

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

78.26

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

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

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

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

Date

/ /

Mailing Address
204 Valencia Dr NE

Amount

City State Zip Code
Albuquerque NM 87108

Purpose of Expenditure
mileage

Category/
Type

Office Sought: House State: NM
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Steve Pearce

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For: Primary General
2008
 Other (specify) _____

(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)