LEAGUE OF CONSERVATION VOTERS

MEMORANDUM-NOTE

To: FEC

From: Anne Sauer

Date: 2/17

Re: FEC Form 5's

Total No. of Pages (including cover sheet): 14

Fax: 202-219-0174

Message: Per instruction from Kristen Davis and Adam Rasgon I am re-submitting these forms due to some error in the electronic filing system. Please check with Kristen if you have questions or me at 202-785-8683.

LEAGUE OF CONSERVATION VOTERS
1920 L Street, N.W., Suite 800, Washington, D.C. 20036
Phone: 202-785-8683 Fax: 202-835-0491

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

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

1. Name of Individual, organization or corporation: LEAGUE OF CONSERVATION VOTERS

Address (number and street): 1920 L STREET N.W. #800 ☐ check if different than previously reported

City, State and ZIP Code: WASHINGTON, DC 20036

2. Corporate Filers only: Is the filer a qualified nonprofit corporation? ☒ Yes ☐ No

Individual Filers only: NAME OF EMPLOYER | OCCUPATION

3. Identification number: C90005786

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
☐ July 31 Mid-Year Report

☐ 12-Day Report preceding the election. Type of Election | Date of Election | State

☐ 30-Day Report following the General Election. Date of Election | State

(b) Is this Report an amendment? Yes ☐ No ☐

5. COVERING PERIOD: FROM THROUGH

PAGE 1 OF 13

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
Copy General 102 G Executive DR Sterling Va 20166	Campaign Literature New Mexico	1/28/04	844.30	X		J. Kerry, President
Precision Communications 8601 Georgia Ave Silver Springs, Md 20910	Phone Calls New Mexico	2/4/04	9917.20	X		J. Kerry - President
Bkermire Communications 1890 Preston White Dr Reston, Va 20191	Mailed Lists New Mexico	2/16/04	1113.76	X		John Kerry President

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) ..... $

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) ..... $ 283,514.31

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee. 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: Anne Saer

SIGNATURE (multi-page filers: sign page 1 only): [signature] DATE

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

Any information reported herein may not be copied for sale or use by any person for the purposes of soliciting contributions or for any other commercial purpose except that the name and address of any political committee may be used to solicit contributions from that committee.

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. Name of individual, organization or corporation: LEAGUE OF CONSERVATION VOTERS

Address (number and street) ☐ check if different than previously reported: 1920 L STREET, N.W. #800

City, State and ZIP Code: WASHINGTON, DC 20036

2. Corporate filers only — Is this filer a qualified nonprofit corporation? ☒ Yes ☐ No

Individual filers only — NAME OF EMPLOYER: OCCUPATION:

3. Identification number: C90005786

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
☐ July 31 Mid-Year Report

☐ 12-Day Report preceding the election. Type of Election: Date of Election: State:

☐ 30-Day Report following the General Election. Date of Election: State:

(b) Is this Report an amendment? Yes ☐ No ☐

5. COVERING PERIOD: FROM THROUGH

PAGE 2 OF 13

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENTLY EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
Buying Time, LLC 2715 M St. NW Washington, DC 20007	New Media TV Buys	1/21/04	96,962.50	X		John Kerry President
Yaci Silvery 1920 L Street Washington DC	New Media Internet Ads to send out Webcast	1/16/04	5,500	X		John Kerry President

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) ..... $

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) ..... $

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee. 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 (multi-page filers: sign page 1 only) | DATE

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FEC FORM 5

6/2000

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

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

1. Name of individual, organization or corporation: LEAGUE OF CONSERVATION VOTERS

Address (number and street) ☐ check if different than previously reported: 1920 L STREET, N.W. #800

City, State and ZIP Code: WASHINGTON, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? ☒ Yes ☐ No

Individual filers only: NAME OF EMPLOYER | OCCUPATION

3. Identification number: C90005786

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
☐ July 31 Mid-Year Report

☐ 12-Day Report preceding the election. Type of Election | Date of Election | State

☐ 30-Day Report following the General Election. Date of Election | State

(b) Is this Report an amendment? Yes ☐ No ☐

5. COVERING PERIOD: FROM THROUGH

PAGE 3 OF 13

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
Ann Timberlake P.O. Box 50632 Columbia, SC 29250	South Carolina Signs for Debate	2/3/04	54.60	X		John Kerry President

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) ..... $

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) ..... $

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee. 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.

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FEC FORM 6

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

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

1. Name of individual, organization or corporation: LEAGUE OF CONSERVATION VOTERS

Address (number and street) [ ] check if different than previously reported: 1920 L STREET, N.W. #800

City, State and ZIP Code: WASHINGTON, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? [X] Yes [ ] No

Individual filers only: NAME OF EMPLOYER | OCCUPATION

3. Identification number: C90005786

4. TYPE OF REPORT (check appropriate boxes):

(a) [ ] April 15 Quarterly Report
[ ] July 15 Quarterly Report
[ ] October 15 Quarterly Report
[ ] January 31 Year-End Report
[ ] July 31 Mid-Year Report

[ ] 12-Day Report preceding the election — Type of Election | Date of Election | State

[ ] 30-Day Report following the General Election — Date of Election | State

(b) Is this Report an amendment? Yes [ ] No [ ]

5. COVERING PERIOD: FROM THROUGH

PAGE 4 OF 13

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
Marc Sokolove 1920 L St. N.W. Washington DC 20036	New Hampshire Food/gas Stafford	2/2/04 1/27-2/2	56.75 1020.78	X X		John Kerry President
American Express	New Hampshire Airfare/Food	2/1 1/30 2/4-2/	10,578.83	X		John Kerry President

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) ..... $

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) ..... $

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee. 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 (multi-page filers: sign page 1 only) | DATE

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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. Name of individual, organization or corporation: LEAGUE OF CONSERVATION VOTERS
   Address (number and street) ☐ Check if different than previously reported: 1920 L STREET, N.W. #500
   City, State and ZIP Code: WASHINGTON, DC 20036
2. Corporate filers only: Is the filer a qualified nonprofit corporation? ☒ Yes ☐ No
   Individual filers only: NAME OF EMPLOYER OCCUPATION
3. Identification number: C90005786

4. TYPE OF REPORT (check appropriate boxes):
   (a) ☐ April 15 Quarterly Report
   ☐ July 15 Quarterly Report
   ☐ October 15 Quarterly Report
   ☐ January 31 Year-End Report
   ☐ July 31 Mid-Year Report
   ☐ 12-Day Report preceding the election. Type of Election: Date of Election: State:
   ☐ 30-Day Report following the General Election. Date of Election: State:
   (b) Is this Report an amendment? Yes ☐ No ☐

5. COVERING PERIOD: FROM THROUGH: PAGE 5 OF 13

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
Anjali Bhesin 1920 L St NW Washington DC 20036	Web/CRM Consultant Direct Mail Telephone	11/30 - 2/11 11/30 - 2/4	1311.24 539.62	X X		John Kerry President
Kevin Keele 1920 L St. NW Washington DC	Media Consultant Staff Time	11/30 - 2/14	1989.96	X		John Kerry President

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) ..... $
9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) ..... $

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee. 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 (multi-page filers: sign page 1 only) | DATE

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FEC FORM 5

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Toll Free 800-424-9530 Local 202-694-1100

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5/2002

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

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

1. Name of individual, organization or corporation: LEAGUE OF CONSERVATION VOTERS

Address (number and street) ☐ check if different than previously reported: 1920 L STREET, N.W. #800

City, State and ZIP Code: WASHINGTON, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? ☒ Yes ☐ No

Individual filers only: NAME OF EMPLOYER | OCCUPATION

3. Identification number: C90005786

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
☐ July 31 Mid-Year Report

☐ 12-Day Report preceding the election. Type of Election | Date of Election | State

☐ 30-Day Report following the General Election. Date of Election | State

(b) Is this Report an amendment? Yes ☐ No ☐

5. COVERING PERIOD: FROM THROUGH

PAGE 6 OF 13

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
Kevin Keefe 1920 L Street NW Washington DC 20036	Staff Time New Hampshire	1/24 - 1/28	1756.80	X		John Kerry President
Mark Longabaugh 1920 L St. NW Washington DC 20036	Staff Time New Hampshire	1/24 - 1/27	3444.47	X		John Kerry President

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) ..... $

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) ..... $

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee. In addition, if the independent expenditures reported herein were made for 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 (multi-page filers: sign page 1 only) | DATE

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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. Name of individual, organization or corporation: LEAGUE OF CONSERVATION VOTERS

Address (number and street) ☐ check if different than previously reported: 1920 L STREET, N.W. #800

City, State and ZIP Code: WASHINGTON, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? ☒ Yes ☐ No

Individual filers only: NAME OF EMPLOYER | OCCUPATION

3. Identification number: C90005786

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
☐ July 31 Mid-Year Report

☐ 12-Day Report preceding the election. Type of Election | Date of Election | State

☐ 30-Day Report following the General Election. Date of Election | State

(b) Is this Report an amendment? Yes ☐ No ☐

5. COVERING PERIOD: FROM THROUGH PAGE 7 OF 13

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
Ann Riley 1920 L St. NW Washington DC	staff time New Hampshire	1/22-29	1733.10	X		J. Kerry President
Lovo Wandelowski 1920 L St. NW Washington DC 20036			1060.00	X		
Steven Hansen 1920 L St NW WDC 20036			190.20	X		

8. TOTAL CONTRIBUTIONS (multi-page form: enter total on page 1) ..... $

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) ..... $

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee. 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 (multi-page filers: sign page 1 only) | DATE

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FEC FORM 5

5/2002

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

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

1. Name of Individual, organization or corporation: LEAGUE OF CONSERVATION VOTERS

Address (number and street) ☐ check if different than previously reported: 1920 L STREET NW #800

City, State and ZIP Code: WASHINGTON, DC 20036

2. Corporate filers only — Is the filer a qualified nonprofit corporation? ☒ Yes ☐ No

Individual filers only — NAME OF EMPLOYER | OCCUPATION

3. Identification number: C90005786

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
☐ July 31 Mid-Year Report

☐ 12-Day Report preceding the election. Type of Election | Date of Election | State

☐ 30-Day Report following the General Election. Date of Election | State

(b) Is this Report an amendment? Yes ☐ No ☐

5. COVERING PERIOD: FROM THROUGH

PAGE 8 OF 13

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
Rhett Mack 1920 L St NW WDC 20036	STAFF TIME New Hampshire	1/20-1/27	190.00	X		John Kerry President
Andy Schultz 1920 L St NW WDC 20036	STAFF TIME New Mexico	2/3-7	689.75	X		
Mike Combs 1920 L St NW WDC 20036	STAFF TIME Washington	1/26-1/25	1281.69	X		

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) $

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) $

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified not profit corporation under the Commission's regulations.

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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. Name of individual, organization or corporation: LEAGUE OF CONSERVATION VOTERS

Address (number and street) ☐ check if different than previously reported: 1920 L STREET, N.W. #800

City, State and ZIP Code: WASHINGTON, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? ☒ Yes ☐ No

Individual filers only: NAME OF EMPLOYER OCCUPATION

3. Identification number: C90005786

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
☐ July 31 Mid-Year Report

☐ 12-Day Report preceding the election. Type of Election / Date of Election / State

☐ 30-Day Report following the General Election. Date of Election / State

(b) Is this Report an amendment? Yes ☐ No ☐

5. COVERING PERIOD: FROM THROUGH PAGE 9 OF 13

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
American Express	Car Rental/ Shipping Hotel/Air Washington	1/22-2/5	810.39	X		John Kerry President
Ann Marie Taylor 1920 L St NW WDC 20036	Staff Time Washington	1/22-2/5	1018.64	X		
Matt Blevins 1920 L St NW WDC 20036			1433.69	X		

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) ..... $

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) ..... $

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee. 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 (multi-page filers: sign page 1 only) DATE

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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. Name of individual, organization or corporation: LEAGUE OF CONSERVATION VOTERS

Address (number and street) ☐ check if different than previously reported: 1920 L STREET, N.W. #800

City, State and ZIP Code: WASHINGTON, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? ☒ Yes ☐ No

Individual filers only: NAME OF EMPLOYER | OCCUPATION

3. Identification number: C90005786

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
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☐ July 31 Mid-Year Report

☐ 12-Day Report preceding the election. Type of Election | Date of Election | State

☐ 30-Day Report following the General Election. Date of Election | State

(b) Is this Report an amendment? Yes ☐ No ☐

5. COVERING PERIOD: FROM THROUGH

PAGE VD OF 13

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
Ann Marie Taylor 1920 L St NW WDC 20036	Fly students and distribute lit - Washington	2/4	4000.00	X		John Kerry President
Precision Communications 8601 Georgia Ave Silver Spring Md 20910	Phone Calls Washington	2/5	20,973.57	X		

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) ..... $

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) ..... $

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee. 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 (multi-page filers: sign page 1 only) | DATE

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

Any information reported herein may not be copied for sale or use by any person for the purposes of soliciting contributions or for any other commercial purpose except that the name and address of any political committee may be used to solicit contributions from that committee.

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. Name of individual, organization or corporation: LEAGUE OF CONSERVATION VOTERS

Address (number and street) ☐ check if different than previously reported: 1920 L STREET, N.W. #800

City, State and ZIP Code: WASHINGTON, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? ☒ Yes ☐ No

Individual filers only: NAME OF EMPLOYER | OCCUPATION

3. Identification number: C90005786

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
☐ July 31 Mid-Year Report

☐ 15-Day Report preceding the election. Type of Election | Date of Election | State

☐ 30-Day Report following the General Election. Date of Election | State

(b) Is this Report an amendment? Yes ☐ No ☐

5. COVERING PERIOD: FROM THROUGH

PAGE 11 OF 13

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
Buying Time 2715 M St. NW Washington DC 20036	TV Ads Wisconsin	2/12	11,990.00	X		John Kerry President
Anne Sayers 6546 Doral Cir Madison WI	Student Reg to Distribute Literature Wisconsin	2/12	5,685.00	X		

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) ..... $

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) ..... $

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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. Name of individual, organization or corporation: LEAGUE OF CONSERVATION VOTERS

Address (number and street) ☐ check if different than previously reported: 1920 L STREET N.W. #800

City, State and ZIP Code: WASHINGTON, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? ☒ Yes ☐ No

Individual filers only: NAME OF EMPLOYER | OCCUPATION

3. Identification number: C90005786

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
☐ July 31 Mid-Year Report

☐ 12-Day Report preceding the election. Type of Election | Date of Election | State

☐ 30-Day Report following the General Election. Date of Election | State

(b) Is this Report an amendment? Yes ☐ No ☐

5. COVERING PERIOD FROM THROUGH

PAGE 12 OF 13

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
Data Firm Consulting 12932 W. Placida Evansville WI	Purchase Vote Records Wisconsin	2/13	3978.97	X		John Kerry President

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) ..... $

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) ..... $

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee. 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.

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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. Name of individual, organization, or corporation: LEAGUE OF CONSERVATION VOTERS
   Address (number and street): 1920 L STREET, N.W. #800 ☐ check if different than previously reported
   City, State and ZIP Code: WASHINGTON, DC 20036
2. Corporate Filers only: Is the filer a qualified nonprofit corporation? ☒ Yes ☐ No
   Individual Filers only: NAME OF EMPLOYER OCCUPATION
3. Identification number: C90003786

4. TYPE OF REPORT (check appropriate boxes):
   (a) ☐ April 15 Quarterly Report
   ☐ July 15 Quarterly Report
   ☐ October 15 Quarterly Report
   ☐ January 31 Year-End Report
   ☐ July 31 Mid-Year Report
   ☐ 12-Day Report preceding the election. Type of Election: Date of Election: State
   ☐ 30-Day Report following the General Election. Date of Election: State
   (b) Is this Report an amendment? Yes ☐ No ☐

5. COVERING PERIOD: FROM THROUGH PAGE 13 OF 13

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
Advertising Inc 1611 N. Kent St. Arlington VA 22209	Phone IND's Maryland	2/13	11,499.32	X		N. 6th Congress MD-1

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) ..... $

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) ..... $

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REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

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

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City, State and ZIP Code: WASHINGTON, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? ☒ Yes ☐ No
Individual filers only: NAME OF EMPLOYER OCCUPATION

3. Identification number: C90005186

4. TYPE OF REPORT (check appropriate boxes):
(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
☐ July 31 Mid-Year Report
☐ 12-Day Report preceding the election. Type of Election: Date of Election: State
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(b) Is this Report an amendment? Yes ☐ No ☐

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6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
Terri S. Barnes 400 Montgomery St San Francisco CA 94104	Mailing Election Kentucky	2/17	21,388.[illegible]	X		Bunning Kentucky 06 special
Adar Hu Homebuilder 6190 Grandstaff Ct Alexandria Va 22310	TV Ads Kentucky	2/17	40,580.[illegible]	X		
New South Strategies 2204 Carolina Lane Lexington Ky 40513	Canvass operation Ky-6	2/17	14,500.[illegible]	X		

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) ..... $

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) ..... $

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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PREPARER	DATE PREPARED

(2/2004)