Image# 10931767966 107/2/7#20120 17:06

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	1			
THE 60 PLUS ASSOCIATION				
(b) Address (number and street) check if different than previously reported				
515 KING STREET SUITE 315				
(a) City State and ZID Code				
(c) City, State and ZIP Code	FEC Identification Number			
ALEXANDRIA VA 22314	C C90011685			
2. Corporate filers only Is the filer a qualified nonprofit corporation? Yes X No	000011000			
Individual filers only 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 \(\subseteq \text{No } \(\text{X} \)				
5. COVERING PERIOD: FROM M M M 1 D D V Y Y Y Y Y Y 2 0 1 0				
THROUGH				
M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
6. TOTAL CONTRIBUTIONS	.00			
7. TOTAL INDEPENDENT EXPENDITURES	10644.77			
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 regulation	ns.			
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE			
Amy Fraderick	10/07/22 : 2			
Amy Frederick	10/27/2010			
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# 10931767967 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF FILER (In Full)
THE 60 PLUS ASSOCIATION

THE 60 PLUS ASSOCIATION			
Full Name (Last, First, Middle Initial) of Payee			Date
Direct Response LLC			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 23640 E Beardsley Rd Suite 100			1 0 2 6 2 0 1 0 Amount
City	State	Zip Code	10644.77
Phoenix	AZ	85024	
Purpose of Expenditure		Category/	Office Sought: X House State: AZ
postage, print, production, design		Туре	House Senate District: 01
Name of Federal Candidate Supported or Opposed by	/ Expenditure:		President Check One: Support X Oppose
Colonday Very To Date Day Floring			Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought		372294.53	2010 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			10644.77
(a) 5551517E of Romized independent Experiences	,		
(b) SUBTOTALof Unitemized Independent Expenditure	res		
(c) TOTAL Independent Expenditures			10644.77
(carry total from last page forward to Line 7			