

RECEIVED

2010 OCT -8 AM 11:19

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 Ronald L Britton		3. FEC Identification Number C
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 303 Douglas Ave		
(c) City, State and ZIP Code Eveleth, MN 55734		
2. Corporate filers only Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Individual filers only Name of Employer		Occupation Retired

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

24-Hour Report
 48-Hour Report

b) Is this Report an amendment? Yes No

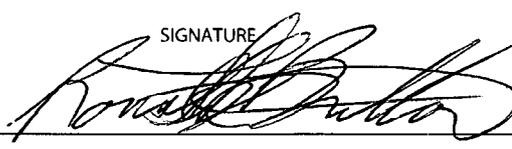
5. COVERING PERIOD: FROM

0 7	0 1	2 0 1 0
THROUGH		
0 9	3 0	2 0 1 0

6. TOTAL CONTRIBUTIONS **1,980,65**

7. TOTAL INDEPENDENT EXPENDITURES **1,980,65**

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any 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
Ronald L Britton		10/7/2010

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 5437g.

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-A
ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FIER (In Full)
Ronald L. Britton

A. Full Name (last, First, Middle Initial) Britton, Ronald L			Date of Receipt
Mailing Address 303 Douglas Ave			0 8 2 4 2 0 1 0
City Eveleth	State MN	Zip Code 55734	Amount of Each Receipt this Period 1 9 8 0 6 5
FEC ID number of contributing federal political committee. C			
Name of Employer			Occupation Retired

B. Full Name (last, First, Middle Initial)			Date of Receipt
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer			Occupation

C. Full Name (last, First, Middle Initial)			Date of Receipt
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer			Occupation

D. Full Name (last, First, Middle Initial)			Date of Receipt
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer			Occupation

SUBTOTAL of Receipts This Page (optional)			
TOTAL This Period (last page carry total to line 6)			1 9 8 0 6 5

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)
Ronald L Britton

Full Name (last, First, Middle Initial) of Payee VictoryStore.com		Date 0 8 2 4 2 0 1 0
Mailing Address 5200 SW 30th St		Amount 1,980.65
City Davenport	State IA	
Purpose of Expenditure Lawn signs		Category/ Type 0 0 4
Name of Federal Candidate Supported or Opposed by Expenditure: Chip Cravaack		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1 9 8 0 6 5		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (last, First, Middle Initial) of Payee		Date
Mailing Address		Amount
City	State	
Purpose of Expenditure		Category/ Type
Name of Federal Candidate Supported or Opposed by Expenditure:		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (last, First, Middle Initial) of Payee		Date
Mailing Address		Amount
City	State	
Purpose of Expenditure		Category/ Type
Name of Federal Candidate Supported or Opposed by Expenditure:		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures	1,980.65
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures (carry total from last page forward to line 7)	1,980.65

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input checked="" type="checkbox"/> USPS Express Mail	Postmarked <i>10/07/2010</i>
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER DATE PREPARED
 (3/2005)