

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 California Nurses Association Political Action Committee (CNA PAC)		3. FEC Identification Number C
(b) Address (number and street) check if different than previously reported 2000 Franklin Street		
(c) City, State and ZIP Code Oakland CA 94612		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? Yes No	
Individual filers only	Name of Employer	Occupation

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

10	09	2012
THROUGH		
10	09	2012

6. TOTAL CONTRIBUTIONS: 0.00

7. TOTAL INDEPENDENT EXPENDITURES: 10,401.69

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 Malinda Markowitz	SIGNATURE <i>Malinda Markowitz</i>	DATE 10/9/12
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NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 1970.

For further information, contact:
Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20469 Toll Free: 800-424-9530 Local: 202-694-1100

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 1 OF 1
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
California Nurses Association Political Action Committee (CNA PAC)

Full Name (Last, First, Middle Initial) of Payee
The Campaign Workshop

Date

10 / 09 / 2012

Mailing Address

1129 20th Street, NW, Suite 200

Amount

10,401.69

City

State

Zip Code

Washington, DC 20036

Purpose of Expenditure

Category/Type
006

Office Sought:

House

State: CA

Senate

District: 15

President

Mailer

Check One:

Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Pete Stark

Disbursement For: Primary

General 12

Other (specify)

Calendar Year-To-Date Per Election for Office Sought

10,401.69

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

Date

Mailing Address

City

State

Zip Code

Amount

Purpose of Expenditure

Category/Type

Office Sought:

House

State: _____

Senate

District: _____

President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One:

Support

Oppose

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: Primary

General

Other (specify)

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

Date

Mailing Address

City

State

Zip Code

Amount

Purpose of Expenditure

Category/Type

Office Sought:

House

State: _____

Senate

District: _____

President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One:

Support

Oppose

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: Primary

General

Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

10,401.69

(b) SUBTOTAL of Unitemized Independent Expenditures

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

10,401.69

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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N/A
PREPARER

N/A
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