

# 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 <b>AMERICAN ACTION NETWORK INC</b>		3. FEC Identification Number <b>C C90011230</b>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 555 13TH STREET NW SUITE 510 WEST		
(c) City, State and ZIP Code WASHINGTON DC 20004		
2. <b>Corporate filers only</b>	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Individual filers only</b>	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

/  /

THROUGH

/  /

6. TOTAL CONTRIBUTIONS .....  0.00

7. TOTAL INDEPENDENT EXPENDITURES .....  169393.00

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.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Stephanie Fenjiro	<i>Stephanie Fenjiro</i>	01/31/2013

*[Electronically Filed]*

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)  
AMERICAN ACTION NETWORK INC

Full Name (Last, First, Middle Initial) of Payee Direct Impact		Date
Mailing Address 1110 Vermont Ave NW, Ste 1100		MM / DD / YYYY 10 / 15 / 2012
City	State	Zip Code
Washington	DC	20005
Purpose of Expenditure Grassroots Material & Distribution		Amount
Category/Type		16930.00
Name of Federal Candidate Supported or Opposed by Expenditure: RAYMOND J CRAVAACK		Transaction ID : F57.4351
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
732305.18		<input type="checkbox"/> Other (specify) _____
Office Sought: <input checked="" type="checkbox"/> House State: MN		
		<input type="checkbox"/> Senate District: 08
		<input type="checkbox"/> President
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		

Full Name (Last, First, Middle Initial) of Payee Direct Impact		Date
Mailing Address 1110 Vermont Ave NW, Ste 1100		MM / DD / YYYY 10 / 15 / 2012
City	State	Zip Code
Washington	DC	20005
Purpose of Expenditure Grassroots Material & Distribution		Amount
Category/Type		16930.00
Name of Federal Candidate Supported or Opposed by Expenditure: JON RUNYAN		Transaction ID : F57.4352
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
16930.00		<input type="checkbox"/> Other (specify) _____
Office Sought: <input checked="" type="checkbox"/> House State: NJ		
		<input type="checkbox"/> Senate District: 03
		<input type="checkbox"/> President
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		

Full Name (Last, First, Middle Initial) of Payee Direct Impact		Date
Mailing Address 1110 Vermont Ave NW, Ste 1100		MM / DD / YYYY 10 / 15 / 2012
City	State	Zip Code
Washington	DC	20005
Purpose of Expenditure Grassroots Material & Distribution		Amount
Category/Type		16930.00
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY BISHOP		Transaction ID : F57.4353
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
16930.00		<input type="checkbox"/> Other (specify) _____
Office Sought: <input checked="" type="checkbox"/> House State: NY		
		<input type="checkbox"/> Senate District: 01
		<input type="checkbox"/> President
Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		

(a) SUBTOTAL of Itemized Independent Expenditures.....	50790.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

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ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AMERICAN ACTION NETWORK INC

Full Name (Last, First, Middle Initial) of Payee Direct Impact		Date
Mailing Address 1110 Vermont Ave NW, Ste 1100		MM / DD / YYYY 10 / 15 / 2012
City	State	Zip Code
Washington	DC	20005
Purpose of Expenditure Grassroots Material & Distribution		Amount
Category/Type		16930.00
Name of Federal Candidate Supported or Opposed by Expenditure: NAN HAYWORTH		Transaction ID : F57.4354
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
16930.00		2012 <input type="checkbox"/> Other (specify) ▶
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: NY District: 18
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		

Full Name (Last, First, Middle Initial) of Payee Direct Impact		Date
Mailing Address 1110 Vermont Ave NW, Ste 1100		MM / DD / YYYY 10 / 15 / 2012
City	State	Zip Code
Washington	DC	20005
Purpose of Expenditure Grassroots Material & Distribution		Amount
Category/Type		16930.00
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTOPHER P GIBSON		Transaction ID : F57.4355
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
16930.00		2012 <input type="checkbox"/> Other (specify) ▶
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: NY District: 19
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		

Full Name (Last, First, Middle Initial) of Payee Direct Impact		Date
Mailing Address 1110 Vermont Ave NW, Ste 1100		MM / DD / YYYY 10 / 15 / 2012
City	State	Zip Code
Washington	DC	20005
Purpose of Expenditure Grassroots Material & Distribution		Amount
Category/Type		16930.00
Name of Federal Candidate Supported or Opposed by Expenditure: WILLIAM OWENS		Transaction ID : F57.4356
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
16930.00		2012 <input type="checkbox"/> Other (specify) ▶
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: NY District: 21
Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	50790.00
(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)  
AMERICAN ACTION NETWORK INC

Full Name (Last, First, Middle Initial) of Payee Direct Impact		Date																				
Mailing Address 1110 Vermont Ave NW, Ste 1100		<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px;">M</td><td style="width: 20px;">M</td><td style="width: 20px;">/</td><td style="width: 20px;">D</td><td style="width: 20px;">D</td><td style="width: 20px;">/</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td></tr> <tr><td>10</td><td></td><td></td><td>15</td><td></td><td></td><td>2012</td><td></td><td></td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			15			2012			
M	M	/	D	D	/	Y	Y	Y	Y													
10			15			2012																
City State Zip Code Washington DC 20005		Amount																				
		93.00																				
Purpose of Expenditure Grassroots Material & Distribution		Transaction ID : F57.4357																				
Category/ Type		Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 22 <input type="checkbox"/> President																				
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD HANNA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose																				
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)																				
		93.00																				

Full Name (Last, First, Middle Initial) of Payee Direct Impact		Date																				
Mailing Address 1110 Vermont Ave NW, Ste 1100		<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px;">M</td><td style="width: 20px;">M</td><td style="width: 20px;">/</td><td style="width: 20px;">D</td><td style="width: 20px;">D</td><td style="width: 20px;">/</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td></tr> <tr><td>10</td><td></td><td></td><td>15</td><td></td><td></td><td>2012</td><td></td><td></td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			15			2012			
M	M	/	D	D	/	Y	Y	Y	Y													
10			15			2012																
City State Zip Code Washington DC 20005		Amount																				
		16930.00																				
Purpose of Expenditure Grassroots Material & Distribution		Transaction ID : F57.4358																				
Category/ Type		Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President																				
Name of Federal Candidate Supported or Opposed by Expenditure: ANN MARIE BUERKLE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose																				
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)																				
		16930.00																				

Full Name (Last, First, Middle Initial) of Payee Direct Impact		Date																				
Mailing Address 1110 Vermont Ave NW, Ste 1100		<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px;">M</td><td style="width: 20px;">M</td><td style="width: 20px;">/</td><td style="width: 20px;">D</td><td style="width: 20px;">D</td><td style="width: 20px;">/</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td></tr> <tr><td>10</td><td></td><td></td><td>15</td><td></td><td></td><td>2012</td><td></td><td></td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			15			2012			
M	M	/	D	D	/	Y	Y	Y	Y													
10			15			2012																
City State Zip Code Washington DC 20005		Amount																				
		16930.00																				
Purpose of Expenditure Grassroots Material & Distribution		Transaction ID : F57.4359																				
Category/ Type		Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 25 <input type="checkbox"/> President																				
Name of Federal Candidate Supported or Opposed by Expenditure: LOUISE M SLAUGHTER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose																				
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)																				
		16930.00																				

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	33953.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	▶	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AMERICAN ACTION NETWORK INC

Full Name (Last, First, Middle Initial) of Payee Direct Impact		Date
Mailing Address 1110 Vermont Ave NW, Ste 1100		MM / DD / YYYY 10 / 15 / 2012
City State Zip Code Washington DC 20005		Amount 16930.00 <b>Transaction ID : F57.4360</b>
Purpose of Expenditure Grassroots Material & Distribution	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KATHLEEN COURTNEY HOCHUL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 292714.67		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Direct Impact		Date
Mailing Address 1110 Vermont Ave NW, Ste 1100		MM / DD / YYYY 10 / 15 / 2012
City State Zip Code Washington DC 20005		Amount 16930.00 <b>Transaction ID : F57.4361</b>
Purpose of Expenditure Grassroots Material & Distribution	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL GRIMM		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 16930.00		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		MM / DD / YYYY
City State Zip Code		Amount
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	33860.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	▶	169393.00