

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation Financial Services Stakeholder Action NFP, d.b.a. Private Equity Stakeholder Action	
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2513 N CENTRAL PARK AVE	
(c) City, State and ZIP Code Chicago, IL 60647	3. FEC Identification Number C
2. Occupation and Name of Employer (for Individual Filers Only)	

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
 July 15 Quarterly Report 24-Hour Report
 October 15 Quarterly Report 48-Hour Report
 January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on / /

5. COVERING PERIOD: FROM / / 2022
 THROUGH / / 2022

6. TOTAL CONTRIBUTIONS.....

7. TOTAL INDEPENDENT EXPENDITURES \$10,000.00

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.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Chris Noble, Esq.



11/01/2022

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 52 U.S.C. § 30109.

For further information, contact: Federal Election Commission, 1050 First Street, N.E., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

2025 RELEASE UNDER E.O. 14176

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Financial Services Stakeholder Action NFP, d.b.a. Private Equity Stakeholder Action

Full Name (Last, First, Middle Initial) of Payee Baker, Jim		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2022	
Mailing Address 2513 N CENTRAL PARK AVE		Amount \$80.00	
City Chicago	State IL	Zip Code 60647	
Purpose of Expenditure Social Media Advertisement	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: J.D. Vance		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought \$80.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rodino, Virginia		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2022	
Mailing Address 2513 N CENTRAL PARK AVE		Amount \$196.00	
City Chicago	State IL	Zip Code 60647	
Purpose of Expenditure Social Media Advertisement	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: J.D. Vance		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought \$196.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Parr, Matt		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2022	
Mailing Address 2513 N CENTRAL PARK AVE		Amount \$168.00	
City Chicago	State IL	Zip Code 60647	
Purpose of Expenditure Social Media Advertisement	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: J.D. Vance		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought \$168.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	\$80.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	\$80.00

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Financial Services Stakeholder Action NFP, d.b.a. Private Equity Stakeholder Action

Full Name (Last, First, Middle Initial) of Payee Speakeasy Political Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2022
Mailing Address 1902 Van Ness Ave 3rd Floor		Amount \$9,500.00
City San Francisco	State CA	Zip Code 94109
Purpose of Expenditure Social Media Advertisement	Category/Type 004	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: J.D. Vance		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought \$9,500.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Christopher Noble		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2022
Mailing Address 2513 N CENTRAL PARK AVE		Amount \$56.00
City Chicago	State IL	Zip Code 60647
Purpose of Expenditure Social Media Advertisement	Category/Type 004	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: J.D. Vance		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought \$56.00		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 of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address		Amount
City	State	Zip Code
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) SUBTOTAL of Itemized Independent Expenditures.....	\$10,000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	\$10,000.00

NON-FEDERAL CAMPAIGN

Via E-Mail

NONI PHONI BOENBO

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	Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<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 checked="" type="checkbox"/> Other (Specify): <i>via email</i>	Date of Receipt or Postmarked <i>11/1/22</i>
<i>WDO</i> PREPARER (3/2015)	<i>11/2/22</i> DATE PREPARED

NON-FUNCTIONAL DOCUMENT