

# 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 <b>Opportunity for All Action Fund</b>			
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1032 15th St NW Ste 247			
(c) City, State and ZIP Code Washington DC 20005			3. FEC Identification Number <div> <div>C</div> <div>C90021353</div> </div>
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   /   /

THROUGH   /   /

6. TOTAL CONTRIBUTIONS.....

7. TOTAL INDEPENDENT EXPENDITURES .....

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 \_\_\_\_\_

*[Electronically Filed]*

McKay, Mike, , ,

*McKay, Mike, , ,*

06/24/2022

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

# **SCHEDULE 5-E** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 2 OF 2  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Opportunity for All Action Fund

Full Name (Last, First, Middle Initial) of Payee  
Adelstein and Associates

Date of Public Distribution/Dissemination

06 / 23 / 2022

Mailing Address 222 W Ontario St  
Ste 600

Amount

City State Zip Code  
Chicago IL 60654-3655

300000.00

Transaction ID : 500222181

Purpose of Expenditure  
TV Advertising & Production - Estimate

Category/  
Type

Office Sought: ☒ House State: IL  
☐ Senate District: 07  
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Davis, Danny, Mr., ,

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election  
for Office Sought 425000.00

Disbursement For: ☒ Primary ☐ General  
2022 ☐ Other (specify) ▶

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

Date of Public Distribution/Dissemination

/ /

Mailing Address

Amount

City State Zip Code

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 of Public Distribution/Dissemination

/ /

Mailing Address

Amount

City State Zip Code

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.....▶ 300000.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures .....▶

(c) **TOTAL** Independent Expenditures.....▶ 300000.00  
(carry total from last page forward to Line 7)