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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) N | Name of Individual, CRICAN ACTIC | rganization or Co | • | cluding Qualined No | inpront corporations | | | | |
|--|---|--|-------------------------------|-------------------------------|---------------------------------------|---------------------|--|--|--|
| 555 | Address (number and 13TH STREET NW | | neck if different than previo | ously reported | | | | | |
| (c) C | City, State and ZIP C | ode | | | 3. FEC ld | entification Number | | | |
| WASHINGTON | | | | DC 20004 | | | | | |
| 2. Corp | Corporate filers only Is the filer a qualified nonprofit corporati | | | on? | 11230 | | | | |
| Indi | vidual filers only | Name of Empl | oyer | | Occupation | | | | |
| | ☐ July 15☐ Octobe☐ Januar | Quarterly Report Quarterly Report r 15 Quarterly Report y 31 Year-End Report port an amendmen | port | 24-Hour Repo | | | | | |
| | | | DITURES | | | .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. | | | | | | | | | |
| TYPE OR PRINT NAME OF PERSON COMPLETING FORM | | | SIGNATURE | [Electronically Filed] | DATE | | | | |
| Stephanie Fenjiro | | | Stephanie Fenjiro | | 09/25/2012 | | | | |
| | NOTE: Submission | on of false, erroneous | or incomplete information ma | ay subject the person signing | g this report to the penalties of 2 l | - | | | |

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

5PG021 FEC Schedule 5 (REV. 09/2005)

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 2 FOR LINE 7 OF FORM 5

| Amount City State Zip Code American Nexă & Advocacy Group Mailing Address B15 Staters Lane City State Zip Code Akexandria VA 22314 Purpose of Expenditure City State Zip Code Sought Senior Sought Orber (specify) Full Name (Last, First, Middle Initial) of Payee Mailing Address Calendar Year-To-Date Per Election for Office Sought Orber (specify) Purpose of Expenditure City State Zip Code Mailing Address Calendar Year-To-Date Per Election for Office Sought Orber (specify) Purpose of Expenditure Calendar Year-To-Date Per Election for Office Sought Orber (specify) Full Name of Federal Candidate Supported or Opposed by Expenditure: City State Zip Code Calendar Year-To-Date Per Election for Office Sought Orber (specify) Purpose of Expenditure Calendar Year-To-Date Per Election for Office Sought Orber (specify) Purpose of Expenditure Calendar Year-To-Date Per Election for Office Sought Orber (specify) Calendar Year-To-Date Per Election for Office Sought Orber (specify) Calendar Year-To-Date Per Election for Office Sought Orber (specify) Calendar Year-To-Date Per Election for Office Sought Orber (specify) Calendar Year-To-Date Per Election for Office Sought Orber (specify) State Zip Code Calendar Year-To-Date Per Election for Office Sought Orber (specify) Calendar Year-To-Date Per Election for Office Sought Orber (specify) State Zip Code Calendar Year-To-Date Per Election for Office Sought Orber (specify) Check One: Support Orber (specify) | AME OF FILER (In Full) AMERICAN ACTION NETWORK INC | | | | | | |
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| Alexandria | Mailing Address 815 Slaters Lane | | | | | 18 | 2012 |
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