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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 Mr. Charles Maynard Uphoff		
(b) Address (number and street) check if different than previously 2475 Lalor Rd.	reported	_
(c) City, State and ZIP Code Fitchburg WI 2. Occupation and Name of Employer (for Individual Filers Only) Retired Retired	53575	3. FEC Identification Number C C90015504
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	4-Hour Report 8-Hour Report 2015	
 TOTAL CONTRIBUTIONS TOTAL INDEPENDENT EXPENDITURES 		.00 719.82
Under penalty of perjury I certify that the independent expenditures reported herein were of, any candidate or authorized committee or agent of either, or any political party com		or concert with, or at the request or suggestion
TYPE OR PRINT NAME OF PERSON COMPLETING FORM	-	DATE ctronically Filed]
Mr. Charles Maynard Uphoff	Mr. Charles Maynard Uphoff	09/18/2015
NOTE: Submission of false, erroneous or incomplete information may su	bject 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

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FOR LIN	E 7	OF FO	RM 5

NAME OF FILER (In Full) Mr. Charles Maynard Uphoff

Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination			
Mr. Charles Maynard Uphoff		09 18 2015		
Mailing Address 2475 Lalor Rd.				
	7: 0 1	Amount		
City State Fitchburg WI	Zip Code 53575	719.82		
Fitchburg WI Purpose of Expenditure		Transaction ID : F57.000001		
Russ 4 us bumper stickers	Category/ Type 006	Senate		
Name of Federal Candidate Supported or Opposed by Expenditure:		President District:		
Russell Feingold		Check One: X Support Oppose		
Calendar Year-To-Date Per Election		Disbursement For: Primary General		
for Office Sought	2015.00	2016 Other (specify)		
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination		
		M = M / D = D / Y = Y = Y = Y		
Mailing Address				
		Amount		
City State	Zip Code			
Purpose of Expenditure	Category/ Type	Office Sought: House State:		
Name of Federal Candidate Supported or Opposed by Expend		President		
Name of rederal Candidate Supported of Opposed by Expenditure.		Check One: Support Oppose		
		Disbursement For: Primary General		
Calendar Year-To-Date Per Election for Office Sought		Other (specify)		
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination		
		M = M / D = D / Y = Y = Y = Y		
Mailing Address				
		Amount		
City State	Zip Code			
Purpose of Expenditure	Category/ Type	Office Sought: House State:		
Name of Federal Candidate Supported or Opposed by Expend		Senate District:		
	nuro.	Check One: Support Oppose		
Calendar Year-To-Date Per Election		Disbursement For: Primary General		
for Office Sought		Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures		▶ 719.82		
(b) SUBTOTAL of Unitemized Independent Expenditures	···· >			
(c) TOTAL Independent Expenditures				
(carry total from last page forward to Line 7)	719.82			