

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
America's Families First Action Fund

ADDRESS (number and street) 2715 M Street NW
Suite 100
 Check if different than previously reported. (ACC)
Washington DC 20007

2. **FEC IDENTIFICATION NUMBER** C00487744
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 02 2010 in the State of _____

5. Covering Period 10 14 2010 through 11 22 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer David Rudd

Signature of Treasurer Electronically Filed by David Rudd Date 03 18 2011

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
America's Families First Action Fund

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		0.00
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	3004694.18									
(c) Total Receipts (from Line 19)	2858010.00	7083010.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5862704.18	7083010.00								
7. Total Disbursements (from Line 31)	5792491.33	7012797.15								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	70212.85	70212.85								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

America's Families First Action Fund

Report Covering the Period:

From:

M M
1 0

D D
1 4

Y Y Y Y
2 0 1 0

To:

M M
1 1

D D
2 2

Y Y Y Y
2 0 1 0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2683000.00	5608000.00
(ii) Unitemized	10.00	10.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2683010.00	5608010.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	175000.00	1475000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	2858010.00	7083010.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	2858010.00	7083010.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2858010.00	7083010.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	759048.91	823822.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	759048.91	823822.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	150000.00	170000.00
24. Independent Expenditure (use Schedule E)	4883442.42	6018974.82
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	5792491.33	7012797.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5792491.33	7012797.15

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	2858010.00	7083010.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2858010.00	7083010.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	759048.91	823822.33
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	759048.91	823822.33

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 50
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A.

Full Name (Last, First, Middle Initial)
Daniel Berger

Mailing Address 1622 Locust Street

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C**

Name of Employer: Berger & Montague Occupation: Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

Date of Receipt: 10 / 28 / 2010

Transaction ID: SA11AI.4259

Amount of Each Receipt this Period: 50000.00

B.

Full Name (Last, First, Middle Initial)
League of Conservation Voters

Mailing Address 1920 L Street NW Suite 800

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer: n/a Occupation: n/a

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt: 10 / 19 / 2010

Transaction ID: SA11AI.4427

Amount of Each Receipt this Period: 20000.00

C.

Full Name (Last, First, Middle Initial)
Southwest Regional Council of Carpenters

Mailing Address 533 S Fremont Ave FL 10

City Los Angeles State CA Zip Code 90071

FEC ID number of contributing federal political committee. **C**

Name of Employer: n/a Occupation: n/a

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500000.00

Date of Receipt: 10 / 15 / 2010

Transaction ID: SA11AI.4436

Amount of Each Receipt this Period: 500000.00

SUBTOTAL of Receipts This Page (optional) ► **570000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 50
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A.	Full Name (Last, First, Middle Initial) Paul Egerman		Date of Receipt
	Mailing Address 77 Westcliff Road		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Weston	State MA	Zip Code 02493
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4268
Name of Employer Scription Inc		Occupation Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230000.00	<input type="text" value="80000.00"/>

B.	Full Name (Last, First, Middle Initial) Sheet Metal Workers Intern Assoc Political Ed Leag		Date of Receipt
	Mailing Address 1750 New York Ave NW		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Washington	State DC	Zip Code 20006
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4440
Name of Employer n/a		Occupation n/a	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 150000.00	<input type="text" value="150000.00"/>

C.	Full Name (Last, First, Middle Initial) Service Employees International Union		Date of Receipt
	Mailing Address 1800 Massachusetts Ave NW		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City Washington	State DC	Zip Code 20005
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4430
Name of Employer n/a		Occupation n/a	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 30000.00	<input type="text" value="30000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="260000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 50

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A.

Full Name (Last, First, Middle Initial)
Service Employees International Union

Mailing Address 1800 Massachusetts Ave NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
n/a n/a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.4432

Amount of Each Receipt this Period

55000.00

B.

Full Name (Last, First, Middle Initial)
Service Employees International Union

Mailing Address 1800 Massachusetts Ave NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
n/a n/a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
114000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.4434

Amount of Each Receipt this Period

29000.00

C.

Full Name (Last, First, Middle Initial)
Irwin Mark Jacobs

Mailing Address 2710 Inverness Ct

City State Zip Code
La Jolla CA 92037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Qualcomm Chair

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
150000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.4263

Amount of Each Receipt this Period

150000.00

SUBTOTAL of Receipts This Page (optional) ▶

234000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A.	Full Name (Last, First, Middle Initial) Laborers' Political League Education Fund		Date of Receipt	
	Mailing Address 905 16th Street NW		M M / D D / Y Y Y Y Y 10 / 18 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.4418
	Washington	DC	20006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		230000.00	
Name of Employer n/a		Occupation n/a		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		230000.00		

B.	Full Name (Last, First, Middle Initial) Laborers' Political League Education Fund		Date of Receipt	
	Mailing Address 905 16th Street NW		M M / D D / Y Y Y Y Y 10 / 20 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.4419
	Washington	DC	20006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		220000.00	
Name of Employer n/a		Occupation n/a		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		450000.00		

C.	Full Name (Last, First, Middle Initial) Laborers' Political League Education Fund		Date of Receipt	
	Mailing Address 905 16th Street NW		M M / D D / Y Y Y Y Y 10 / 28 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.4422
	Washington	DC	20006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		150000.00	
Name of Employer n/a		Occupation n/a		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		600000.00		

SUBTOTAL of Receipts This Page (optional)	▶	600000.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 50
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A.	Full Name (Last, First, Middle Initial) Laborers' Political League Education Fund		Date of Receipt
	Mailing Address 905 16th Street NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City State Zip Code Washington DC 20006		<input type="text"/> 1 1 / <input type="text"/> 0 1 / <input type="text"/> 2 0 1 0
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4424
	Name of Employer n/a Occupation n/a		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 850000.00	

B.	Full Name (Last, First, Middle Initial) John Menke		Date of Receipt
	Mailing Address 255 California Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City State Zip Code San Francisco CA 94111		<input type="text"/> 1 0 / <input type="text"/> 1 5 / <input type="text"/> 2 0 1 0
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4447
	Name of Employer Menke & Associates Occupation Attorney		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 4000.00	

C.	Full Name (Last, First, Middle Initial) Steve Mostyn		Date of Receipt
	Mailing Address 75 Phelan Boulevard		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City State Zip Code Beaumont TX 77706		<input type="text"/> 1 0 / <input type="text"/> 2 1 / <input type="text"/> 2 0 1 0
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4445
	Name of Employer Mostyn Law Firm Occupation Attorney		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 100000.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 354000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 50
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A.

Full Name (Last, First, Middle Initial)
Communication Worker of America

Mailing Address 501 3rd Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11AI.4414

Amount of Each Receipt this Period
10000.00

B.

Full Name (Last, First, Middle Initial)
n/a Red Apple Group

Mailing Address 823 Eleventh Avenue

City New York State NY Zip Code 10019

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11AI.4412

Amount of Each Receipt this Period
10000.00

C.

Full Name (Last, First, Middle Initial)
Pat Stryker

Mailing Address 262 East Mountain Ave

City Fort Collins State CO Zip Code 80524

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
145000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11AI.4258

Amount of Each Receipt this Period
145000.00

SUBTOTAL of Receipts This Page (optional) ► **165000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 12 / 50	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A.	Full Name (Last, First, Middle Initial) Working For Working Americans		Date of Receipt	
	Mailing Address 6801 Placid Street		M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.4438
	Las Vegas	NV	89119	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		500000.00	
Name of Employer n/a		Occupation n/a		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500000.00		

SUBTOTAL of Receipts This Page (optional)	500000.00
TOTAL This Period (last page this line number only)	2683000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 50
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A.

Full Name (Last, First, Middle Initial) LIUNA PAC		Date of Receipt MM / DD / YYYY 10 / 20 / 2010
Mailing Address 905 16th Street NW		Transaction ID: SA11C.4269
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C C00007922		Amount of Each Receipt this Period 150000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150000.00	

B.

Full Name (Last, First, Middle Initial) Sierra Club Political Committee		Date of Receipt MM / DD / YYYY 10 / 26 / 2010
Mailing Address 85 Second Street 2nd Floor		Transaction ID: SA11C.4264
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C C00135368		Amount of Each Receipt this Period 25000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

SUBTOTAL of Receipts This Page (optional)	▶	175000.00
TOTAL This Period (last page this line number only)	▶	175000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address PO Box 25118 City Tampa State FL Zip Code 33622 Purpose of Disbursement Bank Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4281 Date of Disbursement 10 / 15 / 2010 Amount of Each Disbursement this Period 62.00 001 Category/ Type	
B.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address PO Box 25118 City Tampa State FL Zip Code 33622 Purpose of Disbursement Bank Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4283 Date of Disbursement 10 / 18 / 2010 Amount of Each Disbursement this Period 50.00 001 Category/ Type	
C.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address PO Box 25118 City Tampa State FL Zip Code 33622 Purpose of Disbursement Bank Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4285 Date of Disbursement 10 / 19 / 2010 Amount of Each Disbursement this Period 37.00 001 Category/ Type	

SUBTOTAL of Disbursements This Page (optional) ▶

149.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4286 Date of Disbursement
	Mailing Address PO Box 25118	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="21"/> <input type="text" value="1"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/>
	City Tampa State FL Zip Code 33622	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fees Candidate Name	<input type="text" value="12.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4287 Date of Disbursement
	Mailing Address PO Box 25118	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="22"/> <input type="text" value="2"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/>
	City Tampa State FL Zip Code 33622	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fees Candidate Name	<input type="text" value="24.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4288 Date of Disbursement
	Mailing Address PO Box 25118	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="25"/> <input type="text" value="5"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/>
	City Tampa State FL Zip Code 33622	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fees Candidate Name	<input type="text" value="37.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="73.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A. Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address PO Box 25118 <hr/> City Tampa State FL Zip Code 33622 <hr/> Purpose of Disbursement Bank Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4290 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 25.00
	001 Category/ Type
	001 Category/ Type

B. Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address PO Box 25118 <hr/> City Tampa State FL Zip Code 33622 <hr/> Purpose of Disbursement Bank Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4291 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 37.00
	001 Category/ Type
	001 Category/ Type

C. Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address PO Box 25118 <hr/> City Tampa State FL Zip Code 33622 <hr/> Purpose of Disbursement Bank Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4292 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 25.00
	001 Category/ Type
	001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	87.00
TOTAL This Period (last page this line number only) ▶	87.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address PO Box 25118 City Tampa State FL Zip Code 33622 Purpose of Disbursement Bank Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4377 Date of Disbursement 11 / 02 / 2010 Amount of Each Disbursement this Period 25.00 Category/Type 001
B.	Full Name (Last, First, Middle Initial) Future Strategies Mailing Address 26 Hingham Street Suite 2 City Cambridge State MA Zip Code 02138 Purpose of Disbursement Travel & Accommodations Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4315 Date of Disbursement 10 / 29 / 2010 Amount of Each Disbursement this Period 1105.74 Category/Type 002
C.	Full Name (Last, First, Middle Initial) IMS Inc Mailing Address 4809 Morgan Drive City Chevy Chase State MD Zip Code 20185 Purpose of Disbursement Consulting Research Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4449 Date of Disbursement 10 / 15 / 2010 Amount of Each Disbursement this Period 21000.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

22130.74

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A.	Full Name (Last, First, Middle Initial) IMS Inc Mailing Address 4809 Morgan Drive City Chevy Chase State MD Zip Code 20185 Purpose of Disbursement Consulting Research Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4311 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0 Amount of Each Disbursement this Period 2000.00
B.	Full Name (Last, First, Middle Initial) National Education Association Mailing Address 1201 16th Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Staff Salary & Benefits Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4305 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0 Amount of Each Disbursement this Period 9018.27
C.	Full Name (Last, First, Middle Initial) Park Hyatt Hotel Mailing Address 1201 24th Street NW City Washington State DC Zip Code 20037 Purpose of Disbursement Travel & Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4385 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 1 0 Amount of Each Disbursement this Period 709.70

SUBTOTAL of Disbursements This Page (optional)	11727.97
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

<p>A. Full Name (Last, First, Middle Initial) Project New West</p> <p>Mailing Address 191 University Blvd Suite 831</p> <p>City Denver State CO Zip Code 80206</p> <p>Purpose of Disbursement Consulting Research</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4450 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 19200.00</p>
<p>B. Full Name (Last, First, Middle Initial) Project New West</p> <p>Mailing Address 191 University Blvd Suite 831</p> <p>City Denver State CO Zip Code 80206</p> <p>Purpose of Disbursement Consulting Research</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4375 Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 11835.00</p>
<p>C. Full Name (Last, First, Middle Initial) Terris Barnes Walters</p> <p>Mailing Address 400 Montgomery 7th Floor</p> <p>City San Francisco State CA Zip Code 94104</p> <p>Purpose of Disbursement Mail House Generic</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4448 Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 82148.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

113183.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

<p>A. Full Name (Last, First, Middle Initial) The Bonner Group</p> <p>Mailing Address PO Box 523523</p> <p>City Springfield State VA Zip Code 22152</p> <p>Purpose of Disbursement Consulting Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4319</p> <p>Date of Disbursement 11 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 141750.00</p> <p>Category/Type 003</p>
<p>B. Full Name (Last, First, Middle Initial) The New Media Fund</p> <p>Mailing Address 1730 Rhode Island Ave NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Media Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4411</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 460000.00</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Cristina Uribe</p> <p>Mailing Address 3175 Texas Street</p> <p>City Oakland State CA Zip Code 94602</p> <p>Purpose of Disbursement Reimbursement Travel & Accommodations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4277</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 492.75</p> <p>Category/Type 001</p>

SUBTOTAL of Disbursements This Page (optional) ▶

602242.75

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A.	Full Name (Last, First, Middle Initial) Utrecht & Phillips PLCC	Transaction ID: SB21B.4301 Date of Disbursement
	Mailing Address 1900 M Street NW Suite 500	<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement Legal Services	<input type="text" value="1775.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Utrecht & Phillips PLCC	Transaction ID: SB21B.4316 Date of Disbursement
	Mailing Address 1900 M Street NW Suite 500	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement Legal Services	<input type="text" value="2086.50"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Winning Over Washington	Transaction ID: SB21B.4302 Date of Disbursement
	Mailing Address 1501 Crystal Drive Suite 829	<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting Communications	<input type="text" value="5000.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="8861.50"/>
TOTAL This Period (last page this line number only)	<input type="text" value="758454.96"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A.

Full Name (Last, First, Middle Initial)

MAJORITY ACTION

Mailing Address PO BOX 76187

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.4442

Date of Disbursement

10 / 25 / 2010

Amount of Each Disbursement this Period

150000.00

SUBTOTAL of Disbursements This Page (optional)

150000.00

TOTAL This Period (last page this line number only)

150000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 23 / 50	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
America's Families First Action Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Project New West			Nature of Debt (Purpose): Research
Mailing Address 191 University Blvd Suite 831			
City Denver	State CO	ZIP Code 80206	

Outstanding Balance Beginning This Period		Transaction ID: SD10.4154	
11835.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	11835.00	0.00	

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	0.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
650 Mass Ave NW #210

City State Zip Code
Washington DC 20001

Purpose of Expenditure
Media Buy Broadcast & Cable

Category/
Type

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM STEVE II SOUTHERLAND

Calendar Year-To-Date Per Election
for Office Sought 362273.00

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
362273.00

Transaction ID: SE.4342

Office Sought: House State: FL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

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

Mailing Address
650 Mass Ave NW #210

City State Zip Code
Washington DC 20001

Purpose of Expenditure
Media Buy TV & Cable

Category/
Type

Name of Federal Candidate supported or Opposed by expenditure:
ANDREW P HARRIS

Calendar Year-To-Date Per Election
for Office Sought 400000.00

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
400000.00

Transaction ID: SE.4345

Office Sought: House State: MD
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	762273.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
650 Mass Ave NW #210

City State Zip Code
Washington DC 20001

Purpose of Expenditure Category/Type
Media Buy TV & Cable

Name of Federal Candidate supported or Opposed by expenditure:
REID RIBBLE

Calendar Year-To-Date Per Election for Office Sought 290000.00

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
290000.00

Transaction ID: SE.4347

Office Sought: House State: WI
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

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

Mailing Address
650 Mass Ave NW #210

City State Zip Code
Washington DC 20001

Purpose of Expenditure Category/Type
Media Buy Broadcast

Name of Federal Candidate supported or Opposed by expenditure:
RICHARD A BERG

Calendar Year-To-Date Per Election for Office Sought 264106.00

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
264106.00

Transaction ID: SE.4349

Office Sought: House State: ND
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	554106.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
650 Mass Ave NW #210

City Washington	State DC	Zip Code 20001
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Purpose of Expenditure Media Buy Cable	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
ANDREW ROCKY RACZKOWSKI

Calendar Year-To-Date Per Election for Office Sought	130000.00
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
130000.00

Transaction ID: SE.4350

Office Sought: House State: MI
 Senate District: 09
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

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

Mailing Address
2715 M Street Northwest

City Washington	State DC	Zip Code 20007
--------------------	-------------	-------------------

Purpose of Expenditure Production Television Advertising	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
ANDREW P HARRIS

Calendar Year-To-Date Per Election for Office Sought	406805.65
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Amount
6805.65

Transaction ID: SE.4387

Office Sought: House State: MD
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	136805.65
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Mailing Address
2715 M Street Northwest

Amount
5714.99

City State Zip Code
Washington DC 20007

Transaction ID: SE.4388

Purpose of Expenditure
Production Television Advertising

Category/Type

Office Sought: House State: ND
 Senate District: 00
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
RICHARD A BERG

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
269820.99

Disbursement For: Primary General
 Other (specify) : _____
2010

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

Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Mailing Address
2715 M Street Northwest

Amount
5851.85

City State Zip Code
Washington DC 20007

Transaction ID: SE.4389

Purpose of Expenditure
Production Television Advertising

Category/Type

Office Sought: House State: WI
 Senate District: 08
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
REID RIBBLE

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
295851.85

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	11566.84
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Mailing Address
2715 M Street Northwest

Amount
5918.05

City State Zip Code
Washington DC 20007

Transaction ID: SE.4390
Office Sought: House State: FL
 Senate District: 02
 Presidential

Purpose of Expenditure
Production Television Advertising
Category/Type

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM STEVE II SOUTHERLAND

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election
for Office Sought 461107.05

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

Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Mailing Address
2715 M Street Northwest

Amount
5988.11

City State Zip Code
Washington DC 20007

Transaction ID: SE.4391
Office Sought: House State: MI
 Senate District: 09
 Presidential

Purpose of Expenditure
Production Television Advertising
Category/Type

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
ANDREW ROCKY RACZKOWSKI

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election
for Office Sought 135988.11

(a) SUBTOTAL of Itemized Independent Expenditures	11906.16
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Mailing Address
2715 M Street Northwest

Amount
6045.03

City State Zip Code
Washington DC 20007

Transaction ID: SE.4393

Purpose of Expenditure
Production Television Advertising

Category/Type

Office Sought: House State: NH
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
CHARLES F. BASS

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
406030.31

Disbursement For: Primary General
 Other (specify) : _____
2010

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

Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Mailing Address
2715 M Street Northwest

Amount
2307.00

City State Zip Code
Washington DC 20007

Transaction ID: SE.4394

Purpose of Expenditure
Production Radio Advertising

Category/Type

Office Sought: House State: NM
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
STEVAN E. PEARCE

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
38007.00

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	8352.03
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER ▼ C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee Envision Communications		
Mailing Address 2715 M Street Northwest		
City Washington	State DC	Zip Code 20007
Purpose of Expenditure Production Radio Advertising	Category/Type <input style="width:50px;" type="text"/>	
Name of Federal Candidate supported or Opposed by expenditure: SCOTT R TIPTON		
Calendar Year-To-Date Per Election for Office Sought		<input style="width:150px;" type="text" value="146761.00"/>

Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
Amount <input style="width:150px;" type="text" value="2307.00"/>
Transaction ID: SE.4395
Office Sought: <input checked="" type="checkbox"/> House State: <u>CO</u> <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> Presidential
Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010

Full Name (Last, First, Middle, Initial) of Payee Envision Communications		
Mailing Address 2715 M Street Northwest		
City Washington	State DC	Zip Code 20007
Purpose of Expenditure Production Radio Advertising	Category/Type <input style="width:50px;" type="text"/>	
Name of Federal Candidate supported or Opposed by expenditure: DAVID SCHWEIKERT		
Calendar Year-To-Date Per Election for Office Sought		<input style="width:150px;" type="text" value="269543.05"/>

Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
Amount <input style="width:150px;" type="text" value="2245.05"/>
Transaction ID: SE.4396
Office Sought: <input checked="" type="checkbox"/> House State: <u>AZ</u> <input type="checkbox"/> Senate District: <u>05</u> <input type="checkbox"/> Presidential
Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010

(a) SUBTOTAL of Itemized Independent Expenditures	<input style="width:150px;" type="text" value="4552.05"/>
(b) SUBTOTAL of Unitemized Independent Expenditures	<input style="width:150px;" type="text"/>
(c) TOTAL Independent Expenditures	<input style="width:150px;" type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd _____ Date

Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
2929 University SE
Suite 100

City State Zip Code
Minneapolis MN 55414

Purpose of Expenditure Category/Type
Canvass

Name of Federal Candidate supported or Opposed by expenditure:
THOMAS STUART PRICE PERRIELLO

Calendar Year-To-Date Per Election for Office Sought 440983.72

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Amount
190000.00

Transaction ID: SE.4364

Office Sought: House State: VA
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

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

Mailing Address
2929 University SE
Suite 100

City State Zip Code
Minneapolis MN 55414

Purpose of Expenditure Category/Type
Canvass

Name of Federal Candidate supported or Opposed by expenditure:
THOMAS STUART PRICE PERRIELLO

Calendar Year-To-Date Per Election for Office Sought 444983.72

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
4000.00

Transaction ID: SE.4365

Office Sought: House State: VA
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	194000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
PO Box 30084

City State Zip Code
Seattle WA 98113-0084

Purpose of Expenditure Category/Type
Direct Mail

Name of Federal Candidate supported or Opposed by expenditure:
DAVID SCHWEIKERT

Calendar Year-To-Date Per Election for Office Sought 243352.00

Date
MM / DD / YYYY
10 / 18 / 2010

Amount
101246.00

Transaction ID: SE.4341

Office Sought: House State: AZ
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

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

Mailing Address
PO Box 30084

City State Zip Code
Seattle WA 98113-0084

Purpose of Expenditure Category/Type
Direct Mail

Name of Federal Candidate supported or Opposed by expenditure:
DAVID SCHWEIKERT

Calendar Year-To-Date Per Election for Office Sought 267298.00

Date
MM / DD / YYYY
10 / 26 / 2010

Amount
23946.00

Transaction ID: SE.4369

Office Sought: House State: AZ
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	125192.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date MM / DD / YYYY
03 / 18 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Mundy Katowitz Media

Mailing Address
1322 G Street SE

City State Zip Code
Washington DC 20003

Purpose of Expenditure Category/Type
Media Buy TV & Cable

Name of Federal Candidate supported or Opposed by expenditure:
CHARLES F. BASS

Calendar Year-To-Date Per Election for Office Sought 399985.28

Date
MM / DD / YYYY
10 / 20 / 2010

Amount
399985.28

Transaction ID: SE.4354

Office Sought: House State: NH
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Mundy Katowitz Media

Mailing Address
1322 G Street SE

City State Zip Code
Washington DC 20003

Purpose of Expenditure Category/Type
Media Buy & Production Radio

Name of Federal Candidate supported or Opposed by expenditure:
DAVID JEFFREY HARMER

Calendar Year-To-Date Per Election for Office Sought 149900.00

Date
MM / DD / YYYY
10 / 27 / 2010

Amount
149900.00

Transaction ID: SE.4372

Office Sought: House State: CA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	549885.28
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date MM / DD / YYYY
03 / 18 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Mundy Katowitz Media

Mailing Address
1322 G Street SE

City State Zip Code
Washington DC 20003

Purpose of Expenditure Category/Type
Media Buy Broadcast

Name of Federal Candidate supported or Opposed by expenditure:
CHARLES F. BASS

Calendar Year-To-Date Per Election for Office Sought **681030.31**

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
275000.00

Transaction ID: SE.4373

Office Sought: House State: NH
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Terris Barnes Walters

Mailing Address
400 Montgomery
7th Floor

City State Zip Code
San Francisco CA 94104

Purpose of Expenditure Category/Type
Direct Mail

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM STEVE II SOUTHERLAND

Calendar Year-To-Date Per Election for Office Sought **408731.00**

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
46458.00

Transaction ID: SE.4348

Office Sought: House State: FL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	321458.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Terris Barnes Walters

Mailing Address
400 Montgomery
7th Floor

City State Zip Code
San Francisco CA 94104

Purpose of Expenditure Category/Type
Direct Mail

Name of Federal Candidate supported or Opposed by expenditure:
ROBERT JAMES JR DOLD

Calendar Year-To-Date Per Election for Office Sought 125428.00

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
31357.00

Transaction ID: SE.4355

Office Sought: House State: IL
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Terris Barnes Walters

Mailing Address
400 Montgomery
7th Floor

City State Zip Code
San Francisco CA 94104

Purpose of Expenditure Category/Type
Direct Mail

Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL G FITZPATRICK

Calendar Year-To-Date Per Election for Office Sought 156348.00

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
39087.00

Transaction ID: SE.4358

Office Sought: House State: PA
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	70444.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Terris Barnes Walters

Mailing Address
400 Montgomery
7th Floor

City State Zip Code
San Francisco CA 94104

Purpose of Expenditure Category/Type
Direct Mail

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM STEVE II SOUTHERLAND

Calendar Year-To-Date Per Election for Office Sought **431960.00**

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
23229.00

Transaction ID: SE.4359

Office Sought: House State: FL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Terris Barnes Walters

Mailing Address
400 Montgomery
7th Floor

City State Zip Code
San Francisco CA 94104

Purpose of Expenditure Category/Type
Direct Mail

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM STEVE II SOUTHERLAND

Calendar Year-To-Date Per Election for Office Sought **455189.00**

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Amount
23229.00

Transaction ID: SE.4361

Office Sought: House State: FL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	46458.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Terris Barnes Walters

Mailing Address
400 Montgomery
7th Floor

City State Zip Code
San Francisco CA 94104

Purpose of Expenditure Category/Type
Direct Mail

Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL G FITZPATRICK

Calendar Year-To-Date Per Election for Office Sought 195435.00

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Amount
39087.00

Transaction ID: SE.4368

Office Sought: House State: PA
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Terris Barnes Walters

Mailing Address
400 Montgomery
7th Floor

City State Zip Code
San Francisco CA 94104

Purpose of Expenditure Category/Type
Direct Mail

Name of Federal Candidate supported or Opposed by expenditure:
ROBERT JAMES JR DOLD

Calendar Year-To-Date Per Election for Office Sought 156785.00

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Amount
31357.00

Transaction ID: SE.4370

Office Sought: House State: IL
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	70444.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Terris Barnes Walters

Mailing Address
400 Montgomery
7th Floor

City San Francisco	State CA	Zip Code 94104
-----------------------	-------------	-------------------

Purpose of Expenditure Direct Mail	Category/ Type
---------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
DANIEL JOSEPH SEALS

Calendar Year-To-Date Per Election for Office Sought	188142.00
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Amount
31357.00

Transaction ID: SE.4371

Office Sought: House State: IL
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Island Ave NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Expenditure Media Buy Radio	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
JEFFREY DAVIS PERRY

Calendar Year-To-Date Per Election for Office Sought	140847.28
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
140847.28

Transaction ID: SE.4340

Office Sought: House State: MA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	172204.28
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1730 Rhode Islnd Ave NW

Amount
250595.40

City State Zip Code
Washington DC 20036

Transaction ID: SE.4343
Office Sought: House State: AZ
 Senate District: 07
 Presidential

Purpose of Expenditure Category/Type
Media Buy Cable & TV

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
RUTH CRAWFORD MCCLUNG

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election for Office Sought
250595.40

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1730 Rhode Islnd Ave NW

Amount
375199.88

City State Zip Code
Washington DC 20036

Transaction ID: SE.4344
Office Sought: House State: WI
 Senate District: 07
 Presidential

Purpose of Expenditure Category/Type
Media Buy TV, Cable & Radio

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
SEAN P DUFFY

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election for Office Sought
375199.88

(a) SUBTOTAL of Itemized Independent Expenditures	625795.28
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1730 Rhode Islnd Ave NW

Amount
250983.72

City State Zip Code
Washington DC 20036

Transaction ID: SE.4346

Purpose of Expenditure
Media Buy TV & Cable

Category/Type

Office Sought: House State: VA
 Senate District: 05
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
ROBERT HURT

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
250983.72

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Mailing Address
1730 Rhode Islnd Ave NW

Amount
348689.24

City State Zip Code
Washington DC 20036

Transaction ID: SE.4356

Purpose of Expenditure
Media Buy TV & Radio

Category/Type

Office Sought: House State: IL
 Senate District: 17
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
ROBERT TODD SCHILLING

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
348689.24

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	599672.96
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Islalnd Ave NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Expenditure Media Buy Radio	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
RUTH CRAWFORD MCCLUNG

Calendar Year-To-Date Per Election for Office Sought	305595.40
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
55000.00

Transaction ID: SE.4357

Office Sought: House State: AZ
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Islalnd Ave NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Expenditure Media Buy Radio	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
RANDOLPH ALTSCHULER

Calendar Year-To-Date Per Election for Office Sought	201508.68
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Amount
201508.68

Transaction ID: SE.4360

Office Sought: House State: NY
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	256508.68
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Islnd Ave NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Expenditure Media Buy Radio	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
JEFFREY DAVIS PERRY

Calendar Year-To-Date Per Election for Office Sought	244968.50
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Amount
104121.22

Transaction ID: SE.4366

Office Sought: House State: MA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Islnd Ave NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Expenditure Media Buy Broadcast & Cable	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
TIMOTHY L. WALBERG

Calendar Year-To-Date Per Election for Office Sought	150000.72
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Amount
150000.72

Transaction ID: SE.4367

Office Sought: House State: MI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	254121.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Islnd Ave NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Expenditure Media Buy Radio	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
ROBERT TODD SCHILLING

Calendar Year-To-Date Per Election for Office Sought	355201.16
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
6511.92

Transaction ID: SE.4374

Office Sought: House State: IL
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Islnd Ave NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Expenditure Production TV Advert- ising	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
RUTH CRAWFORD MCCLUNG

Calendar Year-To-Date Per Election for Office Sought	319707.98
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Amount
14112.58

Transaction ID: SE.4397

Office Sought: House State: AZ
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	20624.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Islalnd Ave NW

City State Zip Code
Washington DC 20036

Purpose of Expenditure
Production TV Advert-
ising

Category/
Type

Name of Federal Candidate supported or Opposed by expenditure:
DAVID RIVERA

Calendar Year-To-Date Per Election
for Office Sought 415456.73

Date
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Amount
13394.33

Transaction ID: SE.4398

Office Sought: House State: FL
 Senate District: 25
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Islalnd Ave NW

City State Zip Code
Washington DC 20036

Purpose of Expenditure
Production TV Advert-
ising

Category/
Type

Name of Federal Candidate supported or Opposed by expenditure:
ROBERT HURT

Calendar Year-To-Date Per Election
for Office Sought 448721.09

Date
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Amount
3737.37

Transaction ID: SE.4399

Office Sought: House State: VA
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	17131.70
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Island Ave NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Expenditure Production TV Advertising	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
ROBERT HURT

Calendar Year-To-Date Per Election for Office Sought	457113.76
---	-----------

Date

M M 1 1	D D 1 2	Y Y Y Y 2 0 1 0
------------	------------	--------------------

Amount

8392.67

Transaction ID: SE.4400

Office Sought: House State: VA
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Island Ave NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Expenditure Production TV Advertising	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
SEAN P DUFFY

Calendar Year-To-Date Per Election for Office Sought	378314.72
---	-----------

Date

M M 1 1	D D 1 2	Y Y Y Y 2 0 1 0
------------	------------	--------------------

Amount

3114.84

Transaction ID: SE.4401

Office Sought: House State: WI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	11507.51
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date

M M 0 3	D D 1 8	Y Y Y Y 2 0 1 1
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SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Islnd Ave NW

City State Zip Code
Washington DC 20036

Purpose of Expenditure
Production TV Advert-
ising

Category/
Type

Name of Federal Candidate supported or Opposed by expenditure:
RANDY HULTGREN

Calendar Year-To-Date Per Election
for Office Sought 210923.09

Date
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Amount
11045.09

Transaction ID: SE.4402

Office Sought: House State: IL
 Senate District: 14
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Islnd Ave NW

City State Zip Code
Washington DC 20036

Purpose of Expenditure
Production TV Advert-
ising

Category/
Type

Name of Federal Candidate supported or Opposed by expenditure:
SEAN P DUFFY

Calendar Year-To-Date Per Election
for Office Sought 392067.53

Date
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Amount
13752.81

Transaction ID: SE.4403

Office Sought: House State: WI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	24797.90
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Islnd Ave NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Expenditure Production TV Advert-ising	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
JEFFREY DAVIS PERRY

Calendar Year-To-Date Per Election for Office Sought	248155.41
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Amount
3186.91

Transaction ID: SE.4404

Office Sought: House State: MA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Mailing Address
1730 Rhode Islnd Ave NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Expenditure Production TV Advert-ising	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
ROBERT TODD SCHILLING

Calendar Year-To-Date Per Election for Office Sought	356516.36
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Amount
1315.20

Transaction ID: SE.4405

Office Sought: House State: IL
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	4502.11
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Date
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Mailing Address
1730 Rhode Islnd Ave NW

Amount
3133.76

City State Zip Code
Washington DC 20036

Transaction ID: SE.4406

Purpose of Expenditure
Production TV Advert-
ising

Category/
Type

Office Sought: House State: MA
 Senate District: 10
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JEFFREY DAVIS PERRY

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 251289.17

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Date
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Mailing Address
1730 Rhode Islnd Ave NW

Amount
1990.63

City State Zip Code
Washington DC 20036

Transaction ID: SE.4407

Purpose of Expenditure
Production TV Advert-
ising

Category/
Type

Office Sought: House State: NY
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
RANDOLPH ALTSCHULER

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 203499.31

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	5124.39
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Families First Action Fund	FEC IDENTIFICATION NUMBER C C00487744
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Date
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Mailing Address
1730 Rhode Islnd Ave NW

Amount
4633.78

City State Zip Code
Washington DC 20036

Transaction ID: SE.4408

Purpose of Expenditure
Production TV Advert-
ising

Category/
Type

Office Sought: House State: IL
 Senate District: 17
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
ROBERT TODD SCHILLING

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 361150.14

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
The New Media Fund

Date
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Mailing Address
1730 Rhode Islnd Ave NW

Amount
4005.41

City State Zip Code
Washington DC 20036

Transaction ID: SE.4409

Purpose of Expenditure
Production TV Advert-
ising

Category/
Type

Office Sought: House State: MI
 Senate District: 07
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
TIMOTHY L. WALBERG

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 154006.13

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	8639.19
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

David Rudd
Signature

Date M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) America's Families First Action Fund		FEC IDENTIFICATION NUMBER C C00487744	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		Date M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 1 0	
Full Name (Last, First, Middle, Initial) of Payee The New Media Fund		Amount 15368.97	
Mailing Address 1730 Rhode Island Ave NW		Transaction ID: SE.4410	
City Washington	State DC	Zip Code 20036	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 25 <input type="checkbox"/> Presidential
Purpose of Expenditure Production TV Advertising		Category/ Type	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: DAVID RIVERA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Calendar Year-To-Date Per Election for Office Sought		430825.70	

(a) SUBTOTAL of Itemized Independent Expenditures	15368.97
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	4883442.42
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 (if the reporting entity is not a political party committee) any political party committee or its agent.	
David Rudd Signature	Date M M / D D / Y Y Y Y 0 3 / 1 8 / 2 0 1 1