FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a	Name of Individual, Organization or Corporation	
(b	o) Address (number and street) check if different than previously reported	
(c	c) City, State and ZIP Code	3. FEC Identification Number
2. 0	ccupation and Name of Employer (for Individual Filers Only)	C
	TYPE OF REPORT (check appropriate boxes):	
	(a) April 15 Quarterly Report	
	July 15 Quarterly Report 24-Hour Report	
	October 15 Quarterly Report 48-Hour Report	
	January 31 Year-End Report	
	b) Is this Report an amendment? No Yes, it amends the report filed on 5. COVERING PERIOD: FROM THROUGH THROUGH	
	6. TOTAL CONTRIBUTIONS	
	7. TOTAL INDEPENDENT EXPENDITURES	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.		
TYPE	OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.		

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100