

# 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>AVAAZ FOUNDATION</b>			3. FEC Identification Number <b>C</b> C90016213
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 27 UNION SQUARE WEST SUITE 500			
(c) City, State and ZIP Code NEW YORK NY 10003			
2. Occupation and Name of Employer (for Individual Filers Only)			

4. TYPE OF REPORT (check appropriate boxes):

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report  24-Hour Report
- October 15 Quarterly Report  48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment?  No  Yes, it amends the report filed on  /  /

5. COVERING PERIOD: FROM  /  /  THROUGH  /  /

6. TOTAL CONTRIBUTIONS.....  0.00

7. TOTAL INDEPENDENT EXPENDITURES .....  19514.18

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.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Ruby-Sachs, Emma, Marie, ,	<i>Ruby-Sachs, Emma, Marie, ,</i> [Electronically Filed]	11/04/2016

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F5N

Transaction ID :

Avaaz did not receive any contributions to further the independent expenditures filed within. 11 CFR 109.10(e)(1)(vi)

Form/Schedule:

Transaction ID:

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Addison Lee (Zip - NW1 3ER)		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 35-37 William Road		Amount 19.94	
City London, UK	State ZZ	Zip Code 99999	Transaction ID : F57.4873
Purpose of Expenditure Courier service for event	Category/Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 99654.06		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Addison Lee (Zip - NW1 3ER)		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 35-37 William Road		Amount 19.14	
City London, UK	State ZZ	Zip Code 99999	Transaction ID : F57.4875
Purpose of Expenditure Car for event	Category/Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 99696.64		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Adelphi Graphics Limited (Zip - EC1R 4RP)		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 52-54 Rosebery Ave		Amount 603.68	
City London, UK	State ZZ	Zip Code 99999	Transaction ID : F57.4870
Purpose of Expenditure Printing materials	Category/Type 006	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 99296.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	642.76
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Al-Haddad, Usama, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 2 Girard St. NE		Amount 150.00	
City Washington DC	State DC	Zip Code 20002	Transaction ID : F57.4957
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 115729.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Associated Press		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 450 W 33rd St.		Amount 1500.00	
City New York	State NY	Zip Code 10001	Transaction ID : F57.4869
Purpose of Expenditure Photographer for event	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 98693.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Balliett, Dylan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 195 Driggs Avenue Apt 5A		Amount 75.00	
City Brooklyn	State NY	Zip Code 11222	Transaction ID : F57.4934
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 112373.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	1725.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Bethea, Dominique, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 165 West 161st Street Apt 2		Amount 150.00	
City Bronx	State NY	Zip Code 10452	Transaction ID : F57.4932
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 112148.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cabvision network (zip - E15BL)		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address Hemming St		Amount 26.01	
City London	State NY	Zip Code 99999	Transaction ID : F57.4868
Purpose of Expenditure Travel to an event	Category/ Type 002	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97193.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clare, Bridgette, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 368 Loudoun Drive		Amount 150.00	
City Aiken	State SC	Zip Code 29803	Transaction ID : F57.4927
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 111473.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	326.01
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Clark, Henry, A, ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 34 Log Cabin Lane		Amount 150.00	
City Johnson	State VT	Zip Code 05656	Transaction ID : F57.4937
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 112898.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clyne, Emily, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 1425 17th street NW, Apt 401		Amount 150.00	
City Washington D.C.	State DC	Zip Code 20036	Transaction ID : F57.4935
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 112523.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Coan, Charles, Mundy, ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 602 Columbia St		Amount 150.00	
City Hudson	State NY	Zip Code 12534	Transaction ID : F57.4928
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 111623.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	450.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Cohn, Sydney, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 299 W. 121 St. Apt 3D		Amount 75.00	
City New York	State NY	Zip Code 10027	Transaction ID : F57.4956
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 115579.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Drago, Kathryn, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 2518 Linda Drive		Amount 150.00	
City Tuscaloosa	State AL	Zip Code 35405	Transaction ID : F57.4940
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 113348.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ducretot, Solene, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 112 bis rue Jean-Pierre Timbaud		Amount 443.20	
City Paris, France	State ZZ	Zip Code 75011	Transaction ID : F57.4866
Purpose of Expenditure Videographer for materials production	Category/ Type 006	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 96658.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	668.20
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Eames, Lee, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 944 Park Avenue Apt 6A		Amount 225.00	
City New York	State NY	Zip Code 10028	Transaction ID : F57.4942
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 113723.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Eurostar		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 67 rue de Dunkerque		Amount 508.57	
City Paris, France	State ZZ	Zip Code 75009	Transaction ID : F57.4867
Purpose of Expenditure Travel to an event	Category/Type 002	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97167.01		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gagne, Mika, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 731 MacDonough St Apt 3		Amount 150.00	
City Brooklyn	State NY	Zip Code 11233	Transaction ID : F57.4949
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 114604.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	883.57
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Gera, Baron, M, ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 436 E. 66th Street Apt 3W		Amount 75.00	
City New York	State NY	Zip Code 10065	
Purpose of Expenditure Temporary admin staff for phone bank (estimate)		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 111323.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4926

Full Name (Last, First, Middle Initial) of Payee Goldfeder, Arthur, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 218 Milburn Street		Amount 150.00	
City Rochester	State NY	Zip Code 14607	
Purpose of Expenditure Temporary admin staff for phone bank (estimate)		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 111098.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4924

Full Name (Last, First, Middle Initial) of Payee Great Western Railway (Zip - SN1 1HL)		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 1 Milford St		Amount 165.89	
City Swindon, UK	State ZZ	Zip Code 99999	
Purpose of Expenditure Travel to an event		Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 99875.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4877

(a) SUBTOTAL of Itemized Independent Expenditures.....	390.89
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Hughes, Douglas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 2112 Pleasant View Avenue		Amount 150.00	
City Ruskin	State FL	Zip Code 33570	
Purpose of Expenditure Temporary admin staff for phone bank (estimate)		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 112298.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4933

Full Name (Last, First, Middle Initial) of Payee Huitt, Mary, Meghann, ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 901 E 40th St		Amount 150.00	
City Savannah	State GA	Zip Code 31401	
Purpose of Expenditure Temporary admin staff for phone bank (estimate)		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 114323.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4946

Full Name (Last, First, Middle Initial) of Payee Huse, Audrey (zip -110221), , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address Calle 80 Number 9-69 Apt 301		Amount 150.00	
City Bogota, Colombia	State ZZ	Zip Code 99999	
Purpose of Expenditure Temporary admin staff for phone bank (estimate)		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 111248.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4925

(a) SUBTOTAL of Itemized Independent Expenditures.....	450.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Jermyn, Jonna, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 22 Spring Street Apt 2		Amount 75.00	
City Burlington	State VT	Zip Code 05401	
Purpose of Expenditure Temporary admin staff for phone bank (estimate)		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 113198.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4939

Full Name (Last, First, Middle Initial) of Payee Johnson, Margaret, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 3614 34th St, NW		Amount 150.00	
City Washington D.C.	State DC	Zip Code 20008	
Purpose of Expenditure Temporary admin staff for phone bank (estimate)		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 113873.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4943

Full Name (Last, First, Middle Initial) of Payee Kallman, Nicholas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 1617 NE 86th Ave		Amount 150.00	
City Portland	State OR	Zip Code 97220	
Purpose of Expenditure Temporary admin staff for phone bank (estimate)		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 114754.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4950

(a) SUBTOTAL of Itemized Independent Expenditures.....	375.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Kelley, Amanda Leah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 2720 Oaklawn St.		Amount 75.00	
City	State	Zip Code	Transaction ID : F57.4923
Beaufort	SC	29902	
Purpose of Expenditure Temporary admin staff for phone bank (estimate)		Category/ Type	Office Sought:
		001	<input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		110948.17	

Full Name (Last, First, Middle Initial) of Payee Krasovitzky, Laura, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 218 6th Avenue Apt 1A		Amount 150.00	
City	State	Zip Code	Transaction ID : F57.4941
Brooklyn	NY	11215	
Purpose of Expenditure Temporary admin staff for phone bank (estimate)		Category/ Type	Office Sought:
		001	<input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		113498.17	

Full Name (Last, First, Middle Initial) of Payee Leyland SDM (Zip - EC2A 3NW)		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 2-4 Great Eastern Street		Amount 92.02	
City	State	Zip Code	Transaction ID : F57.4865
London, UK	ZZ	99999	
Purpose of Expenditure costume materials		Category/ Type	Office Sought:
		006	<input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		99634.12	

(a) SUBTOTAL of Itemized Independent Expenditures.....	317.02
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Lopez-Vargas, Mariela, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address Casa 18-1 Urb. Los Reyes, Guacima,		Amount 150.00	
City Alajuela, Costa Rica	State ZZ	Zip Code 22030	Transaction ID : F57.4944
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 114023.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mahmoud, Nora, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 1521 Unionport Road Apt 5A		Amount 75.00	
City Bronx	State NY	Zip Code 10462	Transaction ID : F57.4951
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 114829.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Molfetas, Martha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 332 Rogers Ave Apt D9		Amount 150.00	
City Brooklyn	State NY	Zip Code 11225	Transaction ID : F57.4945
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 114173.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	375.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Niden, Sarah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 6 Court Street Place		Amount 225.00	
City Arlington	State MD	Zip Code 02476	Transaction ID : F57.4952
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 115054.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Phillips, Deepa, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 10 Hadowanetz Drive		Amount 225.00	
City Ogdensburg	State NJ	Zip Code 07439	Transaction ID : F57.4930
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 111998.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Pina, Tinia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 33 West End Ave Apt 3L		Amount 150.00	
City New York	State NY	Zip Code 10023	Transaction ID : F57.4954
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 115354.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	600.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Reames, Alexandra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 3330 Pierce Street		Amount 150.00	
City San Francisco	State CA	Zip Code 94123	Transaction ID : F57.4922
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 110873.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Reames, Cristina, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 480 Vallejo Street #1		Amount 150.00	
City San Francisco	State CA	Zip Code 94133	Transaction ID : F57.4929
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 111773.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rovensky, Michelle, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 1932 Overland Avenue Apt 202		Amount 75.00	
City Los Angeles	State CA	Zip Code 90025	Transaction ID : F57.4947
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 114398.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	375.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Shackleton, Michelle, Anne, ,		Date of Public Distribution/Dissemination 11 / 03 / 2016	
Mailing Address 8003 Maple Avenue Apt 1		Amount 56.25	
City Takoma Park	State MD	Zip Code 20912	
Purpose of Expenditure Temporary admin staff for phone bank (estimate)		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 114454.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4948

Full Name (Last, First, Middle Initial) of Payee Sionas, Emily, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2016	
Mailing Address 1469 Madison Street		Amount 225.00	
City Denver	State CO	Zip Code 80206	
Purpose of Expenditure Temporary admin staff for phone bank (estimate)		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 112748.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4936

Full Name (Last, First, Middle Initial) of Payee Targetsmart		Date of Public Distribution/Dissemination 11 / 03 / 2016	
Mailing Address 1155 15th St, NW, Suite 1000		Amount 2722.83	
City Washington DC	State DC	Zip Code 20005	
Purpose of Expenditure Contact list for phone bank event (estimate)		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 110723.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4921

(a) SUBTOTAL of Itemized Independent Expenditures.....	3004.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Tesco (Zip - SW1A 2JR)		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address Portcullis House, Bridge St		Amount 13.45	
City London, UK	State ZZ	Zip Code 99999	Transaction ID : F57.4876
Purpose of Expenditure food for event	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 99710.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name (Last, First, Middle Initial) of Payee Toskr Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 1330 Broadway, 3rd Floor		Amount 8124.36	
City Oakland	State CA	Zip Code 94612	Transaction ID : F57.4920
Purpose of Expenditure SMS credit for phone bank event (estimate)	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 108000.34		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name (Last, First, Middle Initial) of Payee Uber (Zip - E1 8FA)		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address ALDGATE TOWER - FIRST FLOOR 2 LEMAN STREET		Amount 23.44	
City London, UK	State ZZ	Zip Code 99999	Transaction ID : F57.4874
Purpose of Expenditure Travel to an event	Category/ Type 002	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 99677.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	8161.25
(b) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Walters, Travis, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 11 Burlington Circle		Amount 150.00	
City Beaufort	State SC	Zip Code 29906	Transaction ID : F57.4955
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 115504.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Wannabe Facepainting (Zip - E11 2JN)		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 19b Mansfield Rd, Wanstead		Amount 245.40	
City London, UK	State ZZ	Zip Code 99999	Transaction ID : F57.4871
Purpose of Expenditure Makeup artist for event	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 99542.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Wilson, Stephanie, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 5152 58th Lane N		Amount 150.00	
City Kenneth City	State FL	Zip Code 33709	Transaction ID : F57.4953
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 115204.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	545.40
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
AVAAZ FOUNDATION

Full Name (Last, First, Middle Initial) of Payee Yuris, Jasmine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 4057 Hinesburg Rd		Amount 225.00	
City Guildford	State VT	Zip Code 05301	Transaction ID : F57.4938
Purpose of Expenditure Temporary admin staff for phone bank (estimate)	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 113123.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	225.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	19514.18