

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 Colorado People's Action		3. FEC Identification Number C C90016585
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 700 Kalamath St.		
(c) City, State and ZIP Code Denver CO 80204		
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

M M	/	D D	/	Y Y Y Y

5. COVERING PERIOD:

FROM

M M	/	D D	/	Y Y Y Y
10		01		2016

THROUGH

M M	/	D D	/	Y Y Y Y
12		31		2016

6. TOTAL CONTRIBUTIONS.....	0.00
7. TOTAL INDEPENDENT EXPENDITURES	7323.37

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
Chacon, Lizeth, , ,	<i>Chacon, Lizeth, , ,</i>	01/06/2017
	<i>[Electronically Filed]</i>	

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Carrasquillo, Lupita, , ,		Date of Public Distribution/Dissemination 10 / 01 / 2016	
Mailing Address 234 Lincoln St.		Amount 12.99	
City Denver	State CO	Zip Code 80203	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Transaction ID : F57.4129
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Calendar Year-To-Date Per Election for Office Sought		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)

Full Name (Last, First, Middle Initial) of Payee Carrasquillo, Lupita, , ,		Date of Public Distribution/Dissemination 10 / 01 / 2016	
Mailing Address 234 Lincoln St.		Amount 12.99	
City Denver	State CO	Zip Code 80203	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	Transaction ID : F57.4130
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		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)

Full Name (Last, First, Middle Initial) of Payee Carrasquillo, Lupita, , ,		Date of Public Distribution/Dissemination 10 / 07 / 2016	
Mailing Address 234 Lincoln St.		Amount 17.31	
City Denver	State CO	Zip Code 80203	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Transaction ID : F57.4141
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Calendar Year-To-Date Per Election for Office Sought		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)

(a) SUBTOTAL of Itemized Independent Expenditures.....	43.29
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Carrasquillo, Lupita, , ,		Date of Public Distribution/Dissemination 10 / 08 / 2016	
Mailing Address 234 Lincoln St.		Amount 12.99	
City Denver	State CO	Zip Code 80203	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Transaction ID : F57.4142
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Calendar Year-To-Date Per Election for Office Sought		394.36	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Carrasquillo, Lupita, , ,		Date of Public Distribution/Dissemination 10 / 08 / 2016	
Mailing Address 234 Lincoln St.		Amount 12.99	
City Denver	State CO	Zip Code 80203	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	Transaction ID : F57.4143
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		835.55	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Carrasquillo, Lupita, , ,		Date of Public Distribution/Dissemination 10 / 20 / 2016	
Mailing Address 234 Lincoln St.		Amount 17.31	
City Denver	State CO	Zip Code 80203	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Transaction ID : F57.4213
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Calendar Year-To-Date Per Election for Office Sought		556.80	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	43.29
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Carrasquillo, Lupita, , ,		Date of Public Distribution/Dissemination 11 / 07 / 2016	
Mailing Address 234 Lincoln St.		Amount 34.62	
City Denver	State CO	Zip Code 80203	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	Transaction ID : F57.4420
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
		4564.46	

Full Name (Last, First, Middle Initial) of Payee Carrasquillo, Lupita, , ,		Date of Public Distribution/Dissemination 11 / 08 / 2016	
Mailing Address 234 Lincoln St.		Amount 34.62	
City Denver	State CO	Zip Code 80203	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	Transaction ID : F57.4441
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
		5079.12	

Full Name (Last, First, Middle Initial) of Payee Carrasquillo, Lupita, , ,		Date of Public Distribution/Dissemination 11 / 08 / 2016	
Mailing Address 234 Lincoln St.		Amount 34.62	
City Denver	State CO	Zip Code 80203	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Transaction ID : F57.4442
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
		2821.65	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	103.86
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Chacon, Lizeth, , ,		Date of Public Distribution/Dissemination 10 / 01 / 2016	
Mailing Address 15450 E Center Ave. K202		Amount 17.65	
City Aurora	State CO	Zip Code 80017	Transaction ID : F57.4125
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 565.20		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Chacon, Lizeth, , ,		Date of Public Distribution/Dissemination 10 / 01 / 2016	
Mailing Address 15450 E Center Ave. K202		Amount 17.65	
City Aurora	State CO	Zip Code 80017	Transaction ID : F57.4126
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 47.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Chacon, Lizeth, , ,		Date of Public Distribution/Dissemination 10 / 04 / 2016	
Mailing Address 15450 E Center Ave. K202		Amount 35.25	
City Aurora	State CO	Zip Code 80017	Transaction ID : F57.4131
Purpose of Expenditure Paryroll & Benefits - Vote for Carroll	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: CARROLL, MORGAN, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 111.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	70.55
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Chacon, Lizeth, , ,		Date of Public Distribution/Dissemination 10 / 07 / 2016	
Mailing Address 15450 E Center Ave. K202		Amount 35.25	
City Aurora	State CO	Zip Code 80017	Transaction ID : F57.4138
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 183.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chacon, Lizeth, , ,		Date of Public Distribution/Dissemination 10 / 15 / 2016	
Mailing Address 15450 E Center Ave. K202		Amount 35.25	
City Aurora	State CO	Zip Code 80017	Transaction ID : F57.4150
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 1176.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chacon, Lizeth, , ,		Date of Public Distribution/Dissemination 10 / 15 / 2016	
Mailing Address 15450 E Center Ave. K202		Amount 35.25	
City Aurora	State CO	Zip Code 80017	Transaction ID : F57.4151
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 443.32		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	105.75
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Chacon, Lizeth, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2016	
Mailing Address 15450 E Center Ave. K202		Amount 31.25	
City Aurora	State CO	Zip Code 80017	Transaction ID : F57.4211
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		520.25	

Full Name (Last, First, Middle Initial) of Payee Chacon, Lizeth, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 05 / 2016	
Mailing Address 15450 E Center Ave. K202		Amount 15.63	
City Aurora	State CO	Zip Code 80017	Transaction ID : F57.4396
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		4428.48	

Full Name (Last, First, Middle Initial) of Payee Chacon, Lizeth, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 05 / 2016	
Mailing Address 15450 E Center Ave. K202		Amount 15.62	
City Aurora	State CO	Zip Code 80017	Transaction ID : F57.4397
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		2284.89	

(a) SUBTOTAL of Itemized Independent Expenditures.....	62.50
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Chacon, Lizeth, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 15450 E Center Ave. K202		Amount 31.25	
City Aurora	State CO	Zip Code 80017	Transaction ID : F57.4432
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		2659.47	

Full Name (Last, First, Middle Initial) of Payee Chacon, Lizeth, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 15450 E Center Ave. K202		Amount 31.25	
City Aurora	State CO	Zip Code 80017	Transaction ID : F57.4433
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		4916.91	

Full Name (Last, First, Middle Initial) of Payee Clark, Arturo, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 8581 Sweetwater Dr.		Amount 96.00	
City Dallas	State TX	Zip Code 75228	Transaction ID : F57.4365
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		4250.88	

(a) SUBTOTAL of Itemized Independent Expenditures.....	158.50
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Clark, Arturo, , ,		Date of Public Distribution/Dissemination 11 / 02 / 2016	
Mailing Address 8581 Sweetwater Dr.		Amount 96.00	
City Dallas	State TX	Zip Code 75228	Transaction ID : F57.4366
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2107.33		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clark, Arturo, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2016	
Mailing Address 8581 Sweetwater Dr.		Amount 48.00	
City Dallas	State TX	Zip Code 75228	Transaction ID : F57.4370
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2155.33		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clark, Arturo, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2016	
Mailing Address 8581 Sweetwater Dr.		Amount 48.00	
City Dallas	State TX	Zip Code 75228	Transaction ID : F57.4371
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/Type	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 4298.88		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	192.00
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Espinosa, Daniel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 808 S Ridgeland		Amount 114.00	
City Oak Park	State IL	Zip Code 60304	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Transaction ID : F57.4338
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	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 2016 <input type="checkbox"/> Other (specify)	
		1782.16	

Full Name (Last, First, Middle Initial) of Payee Espinosa, Daniel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 808 S Ridgeland		Amount 114.00	
City Oak Park	State IL	Zip Code 60304	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	Transaction ID : F57.4339
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	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 2016 <input type="checkbox"/> Other (specify)	
		3907.43	

Full Name (Last, First, Middle Initial) of Payee Espinosa, Daniel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 808 S Ridgeland		Amount 152.00	
City Oak Park	State IL	Zip Code 60304	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Transaction ID : F57.4360
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	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 2016 <input type="checkbox"/> Other (specify)	
		2011.33	

(a) SUBTOTAL of Itemized Independent Expenditures.....	380.00
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Espinosa, Daniel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 808 S Ridgeland		Amount 152.00	
City Oak Park	State IL	Zip Code 60304	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	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		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 4154.88	

Transaction ID : F57.4361

Full Name (Last, First, Middle Initial) of Payee FedEx Office		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2016	
Mailing Address 13700 Colfax Ave.		Amount 42.12	
City Aurora	State CO	Zip Code 80011	
Purpose of Expenditure Printing - No on Coffman		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		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 277.33	

Transaction ID : F57.4163

Full Name (Last, First, Middle Initial) of Payee Gamino Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016	
Mailing Address PO Box 9839		Amount 823.52	
City Denver	State CO	Zip Code 80209	
Purpose of Expenditure Printing - Morgan Carroll Committed to our Community		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CARROLL, MORGAN, , ,		Check One: <input checked="" type="checkbox"/> Support <input 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 1380.32	

Transaction ID : F57.4226

(a) SUBTOTAL of Itemized Independent Expenditures.....	1017.64
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Greenwood, Ryan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 1601 Olive St.		Amount 38.00	
City Santa Barbara	State CA	Zip Code 93101	Transaction ID : F57.4415
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		2343.56	

Full Name (Last, First, Middle Initial) of Payee Greenwood, Ryan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 1601 Olive St.		Amount 38.00	
City Santa Barbara	State CA	Zip Code 93101	Transaction ID : F57.4416
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		4487.16	

Full Name (Last, First, Middle Initial) of Payee Greenwood, Ryan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2016	
Mailing Address 1601 Olive St.		Amount 57.00	
City Santa Barbara	State CA	Zip Code 93101	Transaction ID : F57.4424
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		2417.87	

(a) SUBTOTAL of Itemized Independent Expenditures.....	133.00
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Greenwood, Ryan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2016	
Mailing Address 1601 Olive St.		Amount 57.00	
City Santa Barbara	State CA	Zip Code 93101	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	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		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		4675.31	

Transaction ID : F57.4425

Full Name (Last, First, Middle Initial) of Payee Greenwood, Ryan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 1601 Olive St.		Amount 152.00	
City Santa Barbara	State CA	Zip Code 93101	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		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	
		2628.22	

Transaction ID : F57.4430

Full Name (Last, First, Middle Initial) of Payee Greenwood, Ryan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 1601 Olive St.		Amount 152.00	
City Santa Barbara	State CA	Zip Code 93101	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	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		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		4885.66	

Transaction ID : F57.4431

(a) SUBTOTAL of Itemized Independent Expenditures.....	361.00
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Hobby Lobby		Date of Public Distribution/Dissemination 10 / 07 / 2016	
Mailing Address 7000 W. Alameda Ave. Unit H		Amount 73.98	
City LAkewood	State CO	Zip Code 80226	Transaction ID : F57.4165
Purpose of Expenditure Printing - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 381.37		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Home Depot		Date of Public Distribution/Dissemination 10 / 07 / 2016	
Mailing Address 6701 W. Alameda Ave.		Amount 30.06	
City Lakewood	State CO	Zip Code 80226	Transaction ID : F57.4164
Purpose of Expenditure Printing - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moran, Alirio, , ,		Date of Public Distribution/Dissemination 11 / 08 / 2016	
Mailing Address 17468 E Rice Cir, unit E		Amount 41.62	
City Aurora	State CO	Zip Code 80015	Transaction ID : F57.4435
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2701.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	145.66
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Moran, Alirio, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 17468 E Rice Cir, unit E		Amount 41.63	
City Aurora	State CO	Zip Code 80015	Transaction ID : F57.4436
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/Type	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 4958.54		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Murphy, Elizabeth, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2016	
Mailing Address 2035 S Josephine St. Apt 305		Amount 17.31	
City Denver	State CO	Zip Code 80210	Transaction ID : F57.4139
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 200.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Murphy, Elizabeth, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 2035 S Josephine St. Apt 305		Amount 43.28	
City Denver	State CO	Zip Code 80210	Transaction ID : F57.4439
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/Type	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 5044.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.22
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Murphy, Elizabeth, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 2035 S Josephine St. Apt 305		Amount 43.27	
City Denver	State CO	Zip Code 80210	Transaction ID : F57.4440
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		2787.03	

Full Name (Last, First, Middle Initial) of Payee People's Action		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2016	
Mailing Address 810 N Milwaukee Ave.		Amount 320.00	
City Chicago	State IL	Zip Code 60642	Transaction ID : F57.4203
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		1761.34	

Full Name (Last, First, Middle Initial) of Payee People's Action		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2016	
Mailing Address 810 N Milwaukee Ave.		Amount 320.00	
City Chicago	State IL	Zip Code 60642	Transaction ID : F57.4215
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		2109.72	

(a) SUBTOTAL of Itemized Independent Expenditures.....	683.27
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee People's Action		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2016	
Mailing Address 810 N Milwaukee Ave.		Amount 390.00	
City Chicago	State IL	Zip Code 60642	Transaction ID : F57.4269
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/Type	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 2729.57		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee People's Action		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 25 / 2016	
Mailing Address 810 N Milwaukee Ave.		Amount 390.00	
City Chicago	State IL	Zip Code 60642	Transaction ID : F57.4275
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/Type	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 3165.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee People's Action		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2016	
Mailing Address 810 N Milwaukee Ave.		Amount 260.00	
City Chicago	State IL	Zip Code 60642	Transaction ID : F57.4323
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/Type	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 3701.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1040.00
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee People's Action		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 810 N Milwaukee Ave.		Amount 65.00	
City Chicago	State IL	Zip Code 60642	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/Type	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		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		3793.43	

Transaction ID : F57.4334

Full Name (Last, First, Middle Initial) of Payee People's Action		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 810 N Milwaukee Ave.		Amount 65.00	
City Chicago	State IL	Zip Code 60642	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		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	
		1668.16	

Transaction ID : F57.4336

Full Name (Last, First, Middle Initial) of Payee Reese, Jill, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2016	
Mailing Address 732 S Kenyon St		Amount 20.43	
City Seattle	State WA	Zip Code 98108	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		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	
		1576.72	

Transaction ID : F57.4314

(a) SUBTOTAL of Itemized Independent Expenditures.....	150.43
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Reese, Jill, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2016	
Mailing Address 732 S Kenyon St		Amount 20.44	
City Seattle	State WA	Zip Code 98108	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	Transaction ID : F57.4315
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 3441.98		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Rennert, Rachel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2016	
Mailing Address 4205 France Ave.		Amount 57.72	
City North Robbinsdale	State MN	Zip Code 55422	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	Transaction ID : F57.4154
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 1261.96		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Rennert, Rachel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 18 / 2016	
Mailing Address 4205 France Ave.		Amount 57.72	
City North Robbinsdale	State MN	Zip Code 55422	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	Transaction ID : F57.4156
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 1383.62		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	135.88
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Rennert, Rachel, , ,		Date of Public Distribution/Dissemination 10 / 19 / 2016	
Mailing Address 4205 France Ave.		Amount 57.72	
City North Robbinsdale	State MN	Zip Code 55422	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/Type	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 1441.34		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4157

Full Name (Last, First, Middle Initial) of Payee Rennert, Rachel, , ,		Date of Public Distribution/Dissemination 10 / 20 / 2016	
Mailing Address 4205 France Ave.		Amount 19.24	
City North Robbinsdale	State MN	Zip Code 55422	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/Type	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 1789.72		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4207

Full Name (Last, First, Middle Initial) of Payee Rennert, Rachel, , ,		Date of Public Distribution/Dissemination 10 / 20 / 2016	
Mailing Address 4205 France Ave.		Amount 19.24	
City North Robbinsdale	State MN	Zip Code 55422	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 539.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4212

(a) SUBTOTAL of Itemized Independent Expenditures.....	96.20
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Rennert, Rachel, , ,		Date of Public Distribution/Dissemination 10 / 21 / 2016	
Mailing Address 4205 France Ave.		Amount 48.10	
City North Robbinsdale	State MN	Zip Code 55422	Transaction ID : F57.4218
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 2194.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rennert, Rachel, , ,		Date of Public Distribution/Dissemination 10 / 22 / 2016	
Mailing Address 4205 France Ave.		Amount 9.62	
City North Robbinsdale	State MN	Zip Code 55422	Transaction ID : F57.4229
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 2303.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rennert, Rachel, , ,		Date of Public Distribution/Dissemination 10 / 22 / 2016	
Mailing Address 4205 France Ave.		Amount 9.62	
City North Robbinsdale	State MN	Zip Code 55422	Transaction ID : F57.4232
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1419.75		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	67.34
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Ricalday, Maria, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2016	
Mailing Address 384 Chambers Way		Amount 17.07	
City Aurora	State CO	Zip Code 80011	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Transaction ID : F57.4140
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Calendar Year-To-Date Per Election for Office Sought		217.90	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Ricalday, Maria, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2016	
Mailing Address 384 Chambers Way		Amount 42.68	
City Aurora	State CO	Zip Code 80011	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	Transaction ID : F57.4419
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		4529.84	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Ricalday, Maria, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 384 Chambers Way		Amount 42.67	
City Aurora	State CO	Zip Code 80011	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Transaction ID : F57.4437
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Calendar Year-To-Date Per Election for Office Sought		2743.76	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.42
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Ricalday, Maria, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 384 Chambers Way		Amount 42.68	
City Aurora	State CO	Zip Code 80011	Transaction ID : F57.4438
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 5001.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 01 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 15.99	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4127
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 63.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 01 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 15.99	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4128
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 581.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.66
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 04 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 73.08	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4132
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 667.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 05 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 91.35	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4133
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 758.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 06 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 27.41	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4134
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 786.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	191.84
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 07 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 36.54	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4135
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 822.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 07 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 36.54	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4136
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 148.27		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 08 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 13.71	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4144
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 849.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	86.79
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 08 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 13.71	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4145
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 408.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 11 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 73.08	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4146
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 922.34		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 12 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 109.62	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4147
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 1031.96		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	196.41
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 73.08	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4148
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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		Disbursement For: <input type="checkbox"/> Primary 2016 <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		1105.04	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 14 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 36.54	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4149
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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		Disbursement For: <input type="checkbox"/> Primary 2016 <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		1141.58	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 15 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 27.41	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4152
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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		Disbursement For: <input type="checkbox"/> Primary 2016 <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		1204.24	

(a) SUBTOTAL of Itemized Independent Expenditures.....	137.03
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 15 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 27.41	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4153
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 470.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 18 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 63.94	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4155
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 1325.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 20 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 9.14	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4206
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 1770.48		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	100.49
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 20 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 18.27	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4210
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 489.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 21 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 36.54	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4216
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/Type	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 2146.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 22 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 18.27	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4227
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/Type	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 2281.87		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.08
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 22 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 18.27	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4230
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1398.59		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 24 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 36.54	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4268
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 2339.57		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 25 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 73.08	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4277
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 3284.97		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	127.89
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 26 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 22.84	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4285
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/Type	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 3330.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 26 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 22.84	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4286
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1465.67		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 27 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 27.40	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4291
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1493.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.08
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 27 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 27.41	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4292
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 3358.30		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 13.70	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4300
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1524.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 13.71	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4301
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 3389.32		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	54.82
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 29 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 9.13	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4309
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1544.75		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 29 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 9.14	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4310
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/Type	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 3410.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 10 / 31 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 9.13	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4326
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1603.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.40
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 9.14	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4327
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 3728.43		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 13.71	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4340
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 3921.14		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 13.70	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4341
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1795.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	36.55
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 18.27	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4354
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 3968.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 9.14	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4374
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 4308.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 9.13	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4375
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2164.46		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	36.54
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 11 / 04 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 9.14	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4386
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 4351.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 11 / 04 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 9.13	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4387
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2208.21		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 11 / 05 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 9.13	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4394
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2269.27		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.40
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 11 / 05 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 9.14	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4395
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 4412.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 11 / 06 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 9.13	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4405
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2294.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 11 / 06 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 9.14	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4406
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 4437.62		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.41
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 36.54	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4421
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 4601.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 41.04	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4428
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2476.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 41.04	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4429
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 4733.66		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	118.62
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 10 / 21 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 69.24	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4220
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 2263.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 10 / 22 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 11.54	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4228
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 2293.41		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 10 / 22 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 11.54	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4231
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1410.13		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	92.32
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 10 / 24 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 46.16	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	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 2775.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4273

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 10 / 25 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 46.16	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	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 3211.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4276

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 10 / 26 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 23.08	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	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 3308.05		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4283

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.40
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 10 / 26 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 23.08	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4284
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1442.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 10 / 27 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 17.31	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4293
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1510.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 10 / 27 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 17.31	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4294
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 3375.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	57.70
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 11.54	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4302
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1535.62		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 11.54	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4303
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 3400.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 11.54	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4311
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1556.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	34.62
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 10 / 29 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 11.54	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	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 3421.54		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4312

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 10 / 31 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 17.31	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	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 3719.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4324

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 10 / 31 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 17.31	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1594.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.4325

(a) SUBTOTAL of Itemized Independent Expenditures.....	46.16
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 11 / 01 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 28.85	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1824.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : F57.4342

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 11 / 01 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 28.85	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	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 3949.99		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : F57.4343

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 11 / 02 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 34.62	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	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 4002.88		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : F57.4356

(a) SUBTOTAL of Itemized Independent Expenditures.....	92.32
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 34.62	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		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 2016 <input type="checkbox"/> Other (specify)	
		1859.33	

Transaction ID : F57.4357

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 17.31	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		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 2016 <input type="checkbox"/> Other (specify)	
		2181.77	

Transaction ID : F57.4378

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 17.31	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	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		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
		4325.33	

Transaction ID : F57.4379

(a) SUBTOTAL of Itemized Independent Expenditures.....	69.24
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 11 / 04 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 17.31	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4384
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2199.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 11 / 04 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 17.31	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4385
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 4342.64		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 11 / 05 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 51.93	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4392
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 4403.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	86.55
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 11 / 05 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 51.93	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4393
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2260.14		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 11 / 06 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 11.54	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4407
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 4449.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination 11 / 06 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 11.54	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4408
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2305.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	75.01
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 17.31	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	Transaction ID : F57.4422
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		4618.31	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)	

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 17.31	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Transaction ID : F57.4423
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Calendar Year-To-Date Per Election for Office Sought		2360.87	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)	

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 17.31	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Transaction ID : F57.4426
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Calendar Year-To-Date Per Election for Office Sought		2435.18	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)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.93
(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)
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 17.31	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : F57.4427
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/ Type	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 4692.62		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) SUBTOTAL of Itemized Independent Expenditures.....	▶	17.31
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	7323.37