

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>Democratic Socialists of America, Inc.</b>			3. FEC Identification Number <b>C</b> C90015413
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 75 Maiden Lane Suite 702			
(c) City, State and ZIP Code New York NY 10038			
2. Occupation and Name of Employer (for Individual Filers Only)			

4. TYPE OF REPORT (check appropriate boxes):

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

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

5. COVERING PERIOD:  
 FROM  /  /   
 THROUGH  /  /

6. TOTAL CONTRIBUTIONS.....  1746.44

7. TOTAL INDEPENDENT EXPENDITURES .....  43722.30

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Maria Svart	<i>Maria Svart</i>	01/13/2016

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



**SCHEDULE 5-A  
ITEMIZED RECEIPTS**

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

NAME OF FILER (In Full)  
Democratic Socialists of America, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Maria Svart			Date of Receipt																										
Mailing Address 75 Maiden Lane Suite 702			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>10</td><td></td><td></td> <td>20</td><td></td><td></td> <td>2015</td><td></td><td></td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	10			20			2015					
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																		
10			20			2015																							
City	State	Zip Code	<b>Transaction ID : F56.5031</b>																										
New York	NY	10038	Amount of Each Receipt this Period																										
FEC ID number of contributing federal political committee. C			381.00																										
Name of Employer Democratic Socialists of Ameri			Occupation National Director																										

<b>B.</b> Full Name (Last, First, Middle Initial) Maria Svart			Date of Receipt																										
Mailing Address 75 Maiden Lane Suite 702			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td> <td>11</td><td></td><td></td> <td>2015</td><td></td><td></td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	11			11			2015					
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																		
11			11			2015																							
City	State	Zip Code	<b>Transaction ID : F56.5613</b>																										
New York	NY	10038	Amount of Each Receipt this Period																										
FEC ID number of contributing federal political committee. C			12.00																										
Name of Employer Democratic Socialists of Ameri			Occupation National Director																										

<b>C.</b> Full Name (Last, First, Middle Initial) Maria Svart			Date of Receipt																										
Mailing Address 75 Maiden Lane Suite 702			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td> <td>12</td><td></td><td></td> <td>2015</td><td></td><td></td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	11			12			2015					
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																		
11			12			2015																							
City	State	Zip Code	<b>Transaction ID : F56.5611</b>																										
New York	NY	10038	Amount of Each Receipt this Period																										
FEC ID number of contributing federal political committee. C			10.22																										
Name of Employer Democratic Socialists of Ameri			Occupation National Director																										

<b>D.</b> Full Name (Last, First, Middle Initial) Maria Svart			Date of Receipt																										
Mailing Address 75 Maiden Lane Suite 702			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td> <td>12</td><td></td><td></td> <td>2015</td><td></td><td></td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	11			12			2015					
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																		
11			12			2015																							
City	State	Zip Code	<b>Transaction ID : F56.5614</b>																										
New York	NY	10038	Amount of Each Receipt this Period																										
FEC ID number of contributing federal political committee. C			57.80																										
Name of Employer Democratic Socialists of Ameri			Occupation National Director																										

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	461.02
<b>TOTAL</b> This Period (last page carry total to Line 6) .....	▶	

**SCHEDULE 5-A  
ITEMIZED RECEIPTS**

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

NAME OF FILER (In Full)  
Democratic Socialists of America, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Maria Svart			Date of Receipt																						
Mailing Address 75 Maiden Lane Suite 702			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td> <td>15</td><td></td><td></td> <td>2015</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	11			15			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
11			15			2015																			
City	State	Zip Code	<b>Transaction ID : F56.5609</b>																						
New York	NY	10038	Amount of Each Receipt this Period																						
FEC ID number of contributing federal political committee. C			13.44																						
Name of Employer Democratic Socialists of Ameri			Occupation National Director																						

<b>B. Full Name (Last, First, Middle Initial)</b> Maria Svart			Date of Receipt																						
Mailing Address 75 Maiden Lane Suite 702			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td> <td>15</td><td></td><td></td> <td>2015</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	11			15			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
11			15			2015																			
City	State	Zip Code	<b>Transaction ID : F56.5612</b>																						
New York	NY	10038	Amount of Each Receipt this Period																						
FEC ID number of contributing federal political committee. C			12.96																						
Name of Employer Democratic Socialists of Ameri			Occupation National Director																						

<b>C. Full Name (Last, First, Middle Initial)</b> Maria Svart			Date of Receipt																						
Mailing Address 75 Maiden Lane Suite 702			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td> <td>16</td><td></td><td></td> <td>2015</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	11			16			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
11			16			2015																			
City	State	Zip Code	<b>Transaction ID : F56.5610</b>																						
New York	NY	10038	Amount of Each Receipt this Period																						
FEC ID number of contributing federal political committee. C			10.53																						
Name of Employer Democratic Socialists of Ameri			Occupation National Director																						

<b>D. Full Name (Last, First, Middle Initial)</b>			Date of Receipt																						
Mailing Address			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/	D	D	/	Y	Y	Y	Y																
City	State	Zip Code	Amount of Each Receipt this Period																						
			C																						
Name of Employer			Occupation																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	36.93
<b>TOTAL</b> This Period (last page carry total to Line 6) .....	▶	742.01

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee 100 William Garage Corp.		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 11 / 2015	
Mailing Address 100 William St. #301		Amount 3.00	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure parking to load up car for event		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 7835.33	

Transaction ID : F57.5413

Full Name (Last, First, Middle Initial) of Payee 100 William Garage Corp.		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 11 / 2015	
Mailing Address 100 William St. #301		Amount 3.00	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure parking to load up car for event		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 8039.00	

Transaction ID : F57.5415

Full Name (Last, First, Middle Initial) of Payee 100 William Garage Corp.		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 11 / 2015	
Mailing Address 100 William St. #301		Amount 3.00	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure parking to load up car for event		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 7776.59	

Transaction ID : F57.5416

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.00
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee 100 William Garage Corp.		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 11 / 2015	
Mailing Address 100 William St. #301		Amount 3.00	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5417
Purpose of Expenditure parking to load up car for event	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7767.33		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Antiochian Village		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 140 Church Camp Trail		Amount 1996.46	
City Bolivar	State PA	Zip Code 15923	Transaction ID : F57.5453
Purpose of Expenditure venue rental cost for event	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9902.14		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Antiochian Village		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 140 Church Camp Trail		Amount 1996.46	
City Bolivar	State PA	Zip Code 15923	Transaction ID : F57.5455
Purpose of Expenditure venue rental cost for event	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 10105.81		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	3995.92
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Antiochian Village		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 140 Church Camp Trail		Amount 1996.46	
City Bolivar	State PA	Zip Code 15923	Transaction ID : F57.5456
Purpose of Expenditure venue rental cost for event	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Antiochian Village		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 140 Church Camp Trail		Amount 1996.46	
City Bolivar	State PA	Zip Code 15923	Transaction ID : F57.5457
Purpose of Expenditure venue rental cost for event	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Apple Direct Mail Services Ltd.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 33 35th St. Unit #14		Amount 260.20	
City Brooklyn	State NY	Zip Code 11232	Transaction ID : F57.5319
Purpose of Expenditure postage - fundraising	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	4253.12
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Apple Direct Mail Services Ltd.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 33 35th St. Unit #14		Amount 260.20	
City Brooklyn	State NY	Zip Code 11232	
Purpose of Expenditure postage - fundraising		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		5692.33	

Transaction ID : F57.5320

Full Name (Last, First, Middle Initial) of Payee Apple Direct Mail Services Ltd.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 33 35th St. Unit #14		Amount 260.20	
City Brooklyn	State NY	Zip Code 11232	
Purpose of Expenditure postage - fundraising		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		5429.92	

Transaction ID : F57.5321

Full Name (Last, First, Middle Initial) of Payee Apple Direct Mail Services Ltd.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 33 35th St. Unit #14		Amount 260.20	
City Brooklyn	State NY	Zip Code 11232	
Purpose of Expenditure postage - fundraising		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		5420.66	

Transaction ID : F57.5322

(a) SUBTOTAL of Itemized Independent Expenditures.....	780.60
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Apple Direct Mail Services Ltd.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 33 35th St. Unit #14		Amount 206.75	
City Brooklyn	State NY	Zip Code 11232	
Purpose of Expenditure fundraising - mailing house handling		Category/ Type	Transaction ID : F57.5323
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		5695.41	

Full Name (Last, First, Middle Initial) of Payee Apple Direct Mail Services Ltd.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 33 35th St. Unit #14		Amount 206.75	
City Brooklyn	State NY	Zip Code 11232	
Purpose of Expenditure fundraising - mailing house handling		Category/ Type	Transaction ID : F57.5324
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		5899.08	

Full Name (Last, First, Middle Initial) of Payee Apple Direct Mail Services Ltd.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 33 35th St. Unit #14		Amount 206.75	
City Brooklyn	State NY	Zip Code 11232	
Purpose of Expenditure fundraising - mailing house handling		Category/ Type	Transaction ID : F57.5325
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		5636.67	

(a) SUBTOTAL of Itemized Independent Expenditures.....	620.25
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Apple Direct Mail Services Ltd.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 33 35th St. Unit #14		Amount 206.75	
City Brooklyn	State NY	Zip Code 11232	
Purpose of Expenditure fundraising - mailing house handling		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		5627.41	

Transaction ID : F57.5326

Full Name (Last, First, Middle Initial) of Payee Apple Direct Mail Services Ltd.		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2015	
Mailing Address 33 35th St. Unit #14		Amount 122.06	
City Brooklyn	State NY	Zip Code 11232	
Purpose of Expenditure periodical mailing house handling		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		12711.80	

Transaction ID : F57.5540

Full Name (Last, First, Middle Initial) of Payee Apple Direct Mail Services Ltd.		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2015	
Mailing Address 33 35th St. Unit #14		Amount 122.06	
City Brooklyn	State NY	Zip Code 11232	
Purpose of Expenditure periodical mailing house handling		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		12915.47	

Transaction ID : F57.5541

(a) SUBTOTAL of Itemized Independent Expenditures.....	450.87
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Apple Direct Mail Services Ltd.		Date of Public Distribution/Dissemination 12 / 02 / 2015	
Mailing Address 33 35th St. Unit #14		Amount 122.06	
City Brooklyn	State NY	Zip Code 11232	
Purpose of Expenditure periodical mailing house handling		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 12653.06		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5542

Full Name (Last, First, Middle Initial) of Payee Apple Direct Mail Services Ltd.		Date of Public Distribution/Dissemination 12 / 02 / 2015	
Mailing Address 33 35th St. Unit #14		Amount 122.06	
City Brooklyn	State NY	Zip Code 11232	
Purpose of Expenditure periodical mailing house handling		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 12643.80		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5542

Full Name (Last, First, Middle Initial) of Payee Ardeon Realty Corp.		Date of Public Distribution/Dissemination 10 / 21 / 2015	
Mailing Address PO Box 2612		Amount 1491.60	
City New York	State NY	Zip Code 10108	
Purpose of Expenditure rental costs for venue space		Category/ Type	Office Sought: <input type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3767.32		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5362

(a) SUBTOTAL of Itemized Independent Expenditures.....	1735.72
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 27 / 2015	
Mailing Address 1681 65th Street C1		Amount 22.50	
City Brookly	State NY	Zip Code 11204	Transaction ID : F57.5500
Purpose of Expenditure online organizing services	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11329.28		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 27 / 2015	
Mailing Address 1681 65th Street C1		Amount 22.50	
City Brookly	State NY	Zip Code 11204	Transaction ID : F57.5501
Purpose of Expenditure online organizing services	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11532.95		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 27 / 2015	
Mailing Address 1681 65th Street C1		Amount 22.50	
City Brookly	State NY	Zip Code 11204	Transaction ID : F57.5502
Purpose of Expenditure online organizing services	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11270.54		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	67.50
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 27 / 2015	
Mailing Address 1681 65th Street C1		Amount 22.50	
City Brookly	State NY	Zip Code 11204	Transaction ID : F57.5503
Purpose of Expenditure online organizing services	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11261.28		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 29 / 2015	
Mailing Address 1681 65th Street C1		Amount 22.50	
City Brookly	State NY	Zip Code 11204	Transaction ID : F57.5504
Purpose of Expenditure online organizing services	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11351.78		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 29 / 2015	
Mailing Address 1681 65th Street C1		Amount 22.50	
City Brookly	State NY	Zip Code 11204	Transaction ID : F57.5505
Purpose of Expenditure online organizing services	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11555.45		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	67.50
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 29 / 2015	
Mailing Address 1681 65th Street C1		Amount 22.50	
City Brookly	State NY	Zip Code 11204	
Purpose of Expenditure online organizing services		Category/ Type	Transaction ID : F57.5506
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought 11293.04		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 29 / 2015	
Mailing Address 1681 65th Street C1		Amount 22.50	
City Brookly	State NY	Zip Code 11204	
Purpose of Expenditure online organizing services		Category/ Type	Transaction ID : F57.5507
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Calendar Year-To-Date Per Election for Office Sought 11283.78		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 1681 65th Street C1		Amount 5.63	
City Brookly	State NY	Zip Code 11204	
Purpose of Expenditure online organizing services		Category/ Type	Transaction ID : F57.5508
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Calendar Year-To-Date Per Election for Office Sought 11357.41		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	50.63
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 1681 65th Street C1		Amount 5.63	
City Brookly	State NY	Zip Code 11204	
Purpose of Expenditure online organizing services		Category/ Type	Transaction ID : F57.5509
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought 11561.08		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 1681 65th Street C1		Amount 5.63	
City Brookly	State NY	Zip Code 11204	
Purpose of Expenditure online organizing services		Category/ Type	Transaction ID : F57.5510
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought 11298.67		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 1681 65th Street C1		Amount 5.63	
City Brookly	State NY	Zip Code 11204	
Purpose of Expenditure online organizing services		Category/ Type	Transaction ID : F57.5511
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Calendar Year-To-Date Per Election for Office Sought 11289.41		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.89
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination 12 / 16 / 2015	
Mailing Address 1681 65th Street C1		Amount 22.50	
City Brookly	State NY	Zip Code 11204	Transaction ID : F57.5584
Purpose of Expenditure online organizing services	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14008.57		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination 12 / 16 / 2015	
Mailing Address 1681 65th Street C1		Amount 22.50	
City Brookly	State NY	Zip Code 11204	Transaction ID : F57.5585
Purpose of Expenditure online organizing services	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14212.24		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination 12 / 16 / 2015	
Mailing Address 1681 65th Street C1		Amount 22.50	
City Brookly	State NY	Zip Code 11204	Transaction ID : F57.5586
Purpose of Expenditure online organizing services	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13949.83		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	67.50
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Betsy Avila		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 16 / 2015	
Mailing Address 1681 65th Street C1		Amount 22.50	
City Brooklyn	State NY	Zip Code 11204	
Purpose of Expenditure online organizing services		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		13940.57	

Transaction ID : F57.5587

Full Name (Last, First, Middle Initial) of Payee Avis		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 68 East 11th St.		Amount 49.49	
City New York	State NY	Zip Code 10003	
Purpose of Expenditure rental car for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		9951.63	

Transaction ID : F57.5458

Full Name (Last, First, Middle Initial) of Payee Avis		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 68 East 11th St.		Amount 49.49	
City New York	State NY	Zip Code 10003	
Purpose of Expenditure rental car for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		10155.30	

Transaction ID : F57.5460

(a) SUBTOTAL of Itemized Independent Expenditures.....	121.48
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Avis		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 68 East 11th St.		Amount 49.49	
City New York	State NY	Zip Code 10003	
Purpose of Expenditure rental car for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9892.89		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5461

Full Name (Last, First, Middle Initial) of Payee Avis		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 68 East 11th St.		Amount 49.49	
City New York	State NY	Zip Code 10003	
Purpose of Expenditure rental car for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9883.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5462

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 26.03	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6440.73		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5356

(a) SUBTOTAL of Itemized Independent Expenditures.....	125.01
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 26.03	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5357
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6644.40		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 26.03	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5358
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6381.99		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 26.03	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5359
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6372.73		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	78.09
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 26.03	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5374
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6723.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 26.03	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5375
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6926.67		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 26.03	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5376
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6664.26		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	78.09
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 26.03	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6655.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5377

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 130.56	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 10470.46		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5475

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 130.56	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 10674.13		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5476

(a) SUBTOTAL of Itemized Independent Expenditures.....	287.15
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 130.56	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		10411.72	

Transaction ID : F57.5477

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 130.56	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		10402.46	

Transaction ID : F57.5478

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 55.32	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		11670.55	

Transaction ID : F57.5520

(a) SUBTOTAL of Itemized Independent Expenditures.....	316.44
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 55.32	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5521
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought 11874.22		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 55.32	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5522
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought 11611.81		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 55.32	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5523
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Calendar Year-To-Date Per Election for Office Sought 11602.55		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	165.96
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination 12 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 58.57	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5578
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13986.07		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination 12 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 58.57	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5579
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14189.74		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination 12 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 58.57	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5582
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13927.33		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	175.71
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination 12 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 58.57	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13918.07		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5583

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination 12 / 31 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 65.08	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14181.77		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5600

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination 12 / 31 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 65.08	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14385.44		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5601

(a) SUBTOTAL of Itemized Independent Expenditures.....	188.73
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 31 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 65.08	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14123.03		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5602

Full Name (Last, First, Middle Initial) of Payee Elena Blanc		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 31 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 65.08	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14113.77		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5603

Full Name (Last, First, Middle Initial) of Payee Blue Mountain Family Restaurant		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 24 Parkside Dr.		Amount 3.24	
City Bernville	State PA	Zip Code 19506	
Purpose of Expenditure food for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7905.68		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5448

(a) SUBTOTAL of Itemized Independent Expenditures.....	133.40
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Blue Mountain Family Restaurant		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 24 Parkside Dr.		Amount 3.24	
City Bernville	State PA	Zip Code 19506	Transaction ID : F57.5450
Purpose of Expenditure food for conference	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 8109.35		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Blue Mountain Family Restaurant		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 24 Parkside Dr.		Amount 3.24	
City Bernville	State PA	Zip Code 19506	Transaction ID : F57.5451
Purpose of Expenditure food for conference	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7846.94		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Blue Mountain Family Restaurant		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 24 Parkside Dr.		Amount 3.24	
City Bernville	State PA	Zip Code 19506	Transaction ID : F57.5452
Purpose of Expenditure food for conference	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7837.68		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.72
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Build a Sign		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 01 / 2015	
Mailing Address 11525A Stonehollow Dr. Suite 100		Amount 557.96	
City Austin	State TX	Zip Code 78758	
Purpose of Expenditure printing promotional materials		Category/ Type	Office Sought: <input type="checkbox"/> House State: GA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 747.92		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5308

Full Name (Last, First, Middle Initial) of Payee Busboys and Poets		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2015	
Mailing Address 1025 5th St. NW		Amount 700.00	
City Washington	State DC	Zip Code 20001	
Purpose of Expenditure rental costs for event venue		Category/ Type	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2497.32		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5365

Full Name (Last, First, Middle Initial) of Payee Cal Copy		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2015	
Mailing Address 1748 Shattuck Avenue		Amount 569.40	
City Berkeley	State CA	Zip Code 94709	
Purpose of Expenditure printing flyers for outreach		Category/ Type	Office Sought: <input type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1036.70		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5402

(a) SUBTOTAL of Itemized Independent Expenditures.....	1827.36
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Capitol Square Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 04 / 2015	
Mailing Address 59 E. Gay St.		Amount 64.50	
City Columbus	State OH	Zip Code 43215	
Purpose of Expenditure printing materials for tabling		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 625.10		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5552

Full Name (Last, First, Middle Initial) of Payee Clarix Technologies		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address 1000 Pittsford Victor Rd.		Amount 5.67	
City Pittsford	State NY	Zip Code 14534	
Purpose of Expenditure software for online event		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7815.16		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5397

Full Name (Last, First, Middle Initial) of Payee Clarix Technologies		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address 1000 Pittsford Victor Rd.		Amount 5.67	
City Pittsford	State NY	Zip Code 14534	
Purpose of Expenditure software for online event		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 8018.83		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5398

(a) SUBTOTAL of Itemized Independent Expenditures.....	75.84
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Clarix Technologies		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address 1000 Pittsford Victor Rd.		Amount 5.67	
City Pittsford	State NY	Zip Code 14534	
Purpose of Expenditure software for online event		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 7756.42	

Transaction ID : F57.5399

Full Name (Last, First, Middle Initial) of Payee Clarix Technologies		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address 1000 Pittsford Victor Rd.		Amount 5.67	
City Pittsford	State NY	Zip Code 14534	
Purpose of Expenditure software for online event		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 7747.16	

Transaction ID : F57.5400

Full Name (Last, First, Middle Initial) of Payee Cracker Barrel Store #312		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 21 Industrial Drive		Amount 2.56	
City Hamburg	State PA	Zip Code 19526	
Purpose of Expenditure food for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 7902.44	

Transaction ID : F57.5441

(a) SUBTOTAL of Itemized Independent Expenditures.....	13.90
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Cracker Barrel Store #312		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 21 Industrial Drive		Amount 2.56	
City Hamburg	State PA	Zip Code 19526	
Purpose of Expenditure food for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		8106.11	

Transaction ID : F57.5444

Full Name (Last, First, Middle Initial) of Payee Cracker Barrel Store #312		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 21 Industrial Drive		Amount 2.56	
City Hamburg	State PA	Zip Code 19526	
Purpose of Expenditure food for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		7843.70	

Transaction ID : F57.5445

Full Name (Last, First, Middle Initial) of Payee Cracker Barrel Store #312		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 21 Industrial Drive		Amount 2.56	
City Hamburg	State PA	Zip Code 19526	
Purpose of Expenditure food for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		7834.44	

Transaction ID : F57.5447

(a) SUBTOTAL of Itemized Independent Expenditures.....	7.68
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Custom Signs Today		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2015	
Mailing Address 2720 Piedmont Rd NE		Amount 359.43	
City Atlanta	State GA	Zip Code 30305	Transaction ID : F57.5341
Purpose of Expenditure printing materials for flyers	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: GA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 1107.35	

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 25.63	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5343
Purpose of Expenditure salary (w/ taxes & benefits)	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 6141.53	

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 25.63	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5344
Purpose of Expenditure salary (w/ taxes & benefits)	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 6345.20	

(a) SUBTOTAL of Itemized Independent Expenditures.....	410.69
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 25.63	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6082.79		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5345

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 25.63	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6073.53		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5346

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 92.91	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6533.64		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5366

(a) SUBTOTAL of Itemized Independent Expenditures.....	144.17
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination 10 / 29 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 92.91	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5367
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6737.31		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination 10 / 29 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 92.91	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5368
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6474.90		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination 10 / 29 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 92.91	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5369
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6465.64		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	278.73
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 14 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 137.76	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5463
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Calendar Year-To-Date Per Election for Office Sought 10089.39		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 14 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 137.76	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5464
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought 10293.06		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 14 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 137.76	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5465
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought 10030.65		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	413.28
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 14 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 137.76	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		10021.39	

Transaction ID : F57.5466

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 22.43	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		11379.84	

Transaction ID : F57.5512

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 22.43	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		11583.51	

Transaction ID : F57.5513

(a) SUBTOTAL of Itemized Independent Expenditures.....	182.62
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 22.43	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		11321.10	

Transaction ID : F57.5514

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 22.43	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		11311.84	

Transaction ID : F57.5515

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 29 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 43.25	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		14051.82	

Transaction ID : F57.5588

(a) SUBTOTAL of Itemized Independent Expenditures.....	88.11
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 29 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 43.25	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5589
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought 14255.49		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 29 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 43.25	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5590
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought 13993.08		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee David Duhalde		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 29 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 43.25	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5591
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Calendar Year-To-Date Per Election for Office Sought 13983.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	129.75
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Ed Handemann Desktop Publishing		Date of Public Distribution/Dissemination 12 / 02 / 2015	
Mailing Address 123 Garfield Pl		Amount 52.37	
City Brooklyn	State NY	Zip Code 11215	Transaction ID : F57.5544
Purpose of Expenditure design work for periodical	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 12764.17		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ed Handemann Desktop Publishing		Date of Public Distribution/Dissemination 12 / 02 / 2015	
Mailing Address 123 Garfield Pl		Amount 52.37	
City Brooklyn	State NY	Zip Code 11215	Transaction ID : F57.5545
Purpose of Expenditure design work for periodical	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 12967.84		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ed Handemann Desktop Publishing		Date of Public Distribution/Dissemination 12 / 02 / 2015	
Mailing Address 123 Garfield Pl		Amount 52.37	
City Brooklyn	State NY	Zip Code 11215	Transaction ID : F57.5546
Purpose of Expenditure design work for periodical	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 12705.43		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	157.11
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Ed Handemann Desktop Publishing		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2015	
Mailing Address 123 Garfield Pl		Amount 52.37	
City Brooklyn	State NY	Zip Code 11215	
Purpose of Expenditure design work for periodical		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5547	

Full Name (Last, First, Middle Initial) of Payee Frank Reynoso Comics and Illustration		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2015	
Mailing Address 467 E. 21st St. Apt 2		Amount 15.75	
City Brooklyn	State NY	Zip Code 11226	
Purpose of Expenditure design work for periodical		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5548	

Full Name (Last, First, Middle Initial) of Payee Frank Reynoso Comics and Illustration		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2015	
Mailing Address 467 E. 21st St. Apt 2		Amount 15.75	
City Brooklyn	State NY	Zip Code 11226	
Purpose of Expenditure design work for periodical		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5549	

(a) SUBTOTAL of Itemized Independent Expenditures.....	83.87
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Frank Reynoso Comics and Illustration		Date of Public Distribution/Dissemination 12 / 02 / 2015	
Mailing Address 467 E. 21st St. Apt 2		Amount 15.75	
City Brooklyn	State NY	Zip Code 11226	
Purpose of Expenditure design work for periodical		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 12721.18		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Frank Reynoso Comics and Illustration		Date of Public Distribution/Dissemination 12 / 02 / 2015	
Mailing Address 467 E. 21st St. Apt 2		Amount 15.75	
City Brooklyn	State NY	Zip Code 11226	
Purpose of Expenditure design work for periodical		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 12711.92		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Giant Eagle		Date of Public Distribution/Dissemination 11 / 12 / 2015	
Mailing Address 117 S. Walnut St.		Amount 14.45	
City Ligonier	State PA	Zip Code 15658	
Purpose of Expenditure food for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7897.72		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	45.95
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Giant Eagle		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 117 S. Walnut St.		Amount 14.45	
City Ligonier	State PA	Zip Code 15658	
Purpose of Expenditure food for conference		Category/ Type	Transaction ID : F57.5434
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought 8101.39		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Giant Eagle		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 117 S. Walnut St.		Amount 14.45	
City Ligonier	State PA	Zip Code 15658	
Purpose of Expenditure food for conference		Category/ Type	Transaction ID : F57.5435
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought 7838.98		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Giant Eagle		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 117 S. Walnut St.		Amount 14.45	
City Ligonier	State PA	Zip Code 15658	
Purpose of Expenditure food for conference		Category/ Type	Transaction ID : F57.5436
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Calendar Year-To-Date Per Election for Office Sought 7829.72		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	43.35
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Giant Eagle		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 117 S. Walnut St.		Amount 2.16	
City Ligonier	State PA	Zip Code 15658	
Purpose of Expenditure food for conference		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		State: IA District: _____	
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
7899.88		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : F57.5437

Full Name (Last, First, Middle Initial) of Payee Giant Eagle		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 117 S. Walnut St.		Amount 2.16	
City Ligonier	State PA	Zip Code 15658	
Purpose of Expenditure food for conference		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		State: NH District: _____	
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
8103.55		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : F57.5438

Full Name (Last, First, Middle Initial) of Payee Giant Eagle		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 117 S. Walnut St.		Amount 2.16	
City Ligonier	State PA	Zip Code 15658	
Purpose of Expenditure food for conference		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		State: NV District: _____	
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
7841.14		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : F57.5439

(a) SUBTOTAL of Itemized Independent Expenditures.....	6.48
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Giant Eagle		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 117 S. Walnut St.		Amount 2.16	
City Ligonier	State PA	Zip Code 15658	
Purpose of Expenditure food for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7831.88		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5440

Full Name (Last, First, Middle Initial) of Payee Gnomon Copy		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 04 / 2015	
Mailing Address 722 South Meadow St. Suite 700		Amount 31.62	
City Ithaca	State NY	Zip Code 14850	
Purpose of Expenditure printing materials for outreach		Category/ Type	Office Sought: <input type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3798.94		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5401

Full Name (Last, First, Middle Initial) of Payee Konika Minolta Premier Finance		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2015	
Mailing Address 1310 Madrid Street Suite 101		Amount 36.43	
City Marshall	State MN	Zip Code 56258	
Purpose of Expenditure copying materials for organizing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6115.90		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5336

(a) SUBTOTAL of Itemized Independent Expenditures.....	70.21
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Konika Minolta Premier Finance		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2015	
Mailing Address 1310 Madrid Street Suite 101		Amount 36.43	
City Marshall	State MN	Zip Code 56258	Transaction ID : F57.5337
Purpose of Expenditure copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6319.57		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Konika Minolta Premier Finance		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2015	
Mailing Address 1310 Madrid Street Suite 101		Amount 36.43	
City Marshall	State MN	Zip Code 56258	Transaction ID : F57.5338
Purpose of Expenditure copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6057.16		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Konika Minolta Premier Finance		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2015	
Mailing Address 1310 Madrid Street Suite 101		Amount 36.43	
City Marshall	State MN	Zip Code 56258	Transaction ID : F57.5339
Purpose of Expenditure copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6047.90		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	109.29
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Konika Minolta Premier Finance		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2015	
Mailing Address 1310 Madrid Street Suite 101		Amount 11.91	
City Marshall	State MN	Zip Code 56258	Transaction ID : F57.5409
Purpose of Expenditure copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7832.33		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Konika Minolta Premier Finance		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2015	
Mailing Address 1310 Madrid Street Suite 101		Amount 11.91	
City Marshall	State MN	Zip Code 56258	Transaction ID : F57.5410
Purpose of Expenditure copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 8036.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Konika Minolta Premier Finance		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2015	
Mailing Address 1310 Madrid Street Suite 101		Amount 11.91	
City Marshall	State MN	Zip Code 56258	Transaction ID : F57.5411
Purpose of Expenditure copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7773.59		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.73
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Konika Minolta Premier Finance		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2015	
Mailing Address 1310 Madrid Street Suite 101		Amount 11.91	
City Marshall	State MN	Zip Code 56258	Transaction ID : F57.5412
Purpose of Expenditure copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7764.33		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Konika Minolta Premier Finance		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 05 / 2015	
Mailing Address 1310 Madrid Street Suite 101		Amount 107.88	
City Marshall	State MN	Zip Code 56258	Transaction ID : F57.5557
Purpose of Expenditure copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 12924.23		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Konika Minolta Premier Finance		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 05 / 2015	
Mailing Address 1310 Madrid Street Suite 101		Amount 107.88	
City Marshall	State MN	Zip Code 56258	Transaction ID : F57.5558
Purpose of Expenditure copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13127.90		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	227.67
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Konika Minolta Premier Finance		Date of Public Distribution/Dissemination 12 / 05 / 2015	
Mailing Address 1310 Madrid Street Suite 101		Amount 107.88	
City Marshall	State MN	Zip Code 56258	Transaction ID : F57.5559
Purpose of Expenditure copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 12865.49		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Konika Minolta Premier Finance		Date of Public Distribution/Dissemination 12 / 05 / 2015	
Mailing Address 1310 Madrid Street Suite 101		Amount 107.88	
City Marshall	State MN	Zip Code 56258	Transaction ID : F57.5560
Purpose of Expenditure copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 12856.23		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 61.80	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5352
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6414.70		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	277.56
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 61.80	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		6618.37	

Transaction ID : F57.5353

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 61.80	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		6355.96	

Transaction ID : F57.5354

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 61.80	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		6346.70	

Transaction ID : F57.5355

(a) SUBTOTAL of Itemized Independent Expenditures.....	185.40
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 54.59	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5384
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		Amount 6777.59	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 54.59	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5385
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		Amount 6981.26	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 54.59	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5386
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		Amount 6718.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	163.77
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 54.59	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6709.59		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5387

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 46.35	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 10339.90		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5471

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 46.35	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 10543.57		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5472

(a) SUBTOTAL of Itemized Independent Expenditures.....	147.29
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 46.35	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 10281.16	

Transaction ID : F57.5473

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 46.35	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 10271.90	

Transaction ID : F57.5474

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 14 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 65.92	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 12990.15	

Transaction ID : F57.5561

(a) SUBTOTAL of Itemized Independent Expenditures.....	158.62
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination 12 / 14 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 65.92	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		13193.82	

Transaction ID : F57.5562

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination 12 / 14 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 65.92	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		12931.41	

Transaction ID : F57.5563

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination 12 / 14 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 65.92	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		12922.15	

Transaction ID : F57.5564

(a) SUBTOTAL of Itemized Independent Expenditures.....	197.76
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 28.84	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		14116.69	

Transaction ID : F57.5596

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 28.84	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		14320.36	

Transaction ID : F57.5597

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 28.84	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		14057.95	

Transaction ID : F57.5598

(a) SUBTOTAL of Itemized Independent Expenditures.....	86.52
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Elizabeth Mahony		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 28.84	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14048.69		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5599

Full Name (Last, First, Middle Initial) of Payee Jim McClanahan		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address 1745 Timber Wolf Dr.		Amount 365.37	
City North Liberty	State IA	Zip Code 52317	
Purpose of Expenditure fundraising calls		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7269.36		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5389

Full Name (Last, First, Middle Initial) of Payee Jim McClanahan		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address 1745 Timber Wolf Dr.		Amount 365.37	
City North Liberty	State IA	Zip Code 52317	
Purpose of Expenditure fundraising calls		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7473.03		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5390

(a) SUBTOTAL of Itemized Independent Expenditures.....	759.58
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Jim McClanahan		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address 1745 Timber Wolf Dr.		Amount 365.37	
City North Liberty	State IA	Zip Code 52317	
Purpose of Expenditure fundraising calls		Category/ Type	Transaction ID : F57.5391
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought		7210.62	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jim McClanahan		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address 1745 Timber Wolf Dr.		Amount 365.37	
City North Liberty	State IA	Zip Code 52317	
Purpose of Expenditure fundraising calls		Category/ Type	Transaction ID : F57.5392
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Calendar Year-To-Date Per Election for Office Sought		7201.36	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jim McClanahan		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 15 / 2015	
Mailing Address 1745 Timber Wolf Dr.		Amount 375.00	
City North Liberty	State IA	Zip Code 52317	
Purpose of Expenditure fundraising calls		Category/ Type	Transaction ID : F57.5565
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Calendar Year-To-Date Per Election for Office Sought		13365.15	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	1105.74
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Jim McClanahan		Date of Public Distribution/Dissemination 12 / 15 / 2015	
Mailing Address 1745 Timber Wolf Dr.		Amount 375.00	
City North Liberty	State IA	Zip Code 52317	
Purpose of Expenditure fundraising calls		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5566	

Full Name (Last, First, Middle Initial) of Payee Jim McClanahan		Date of Public Distribution/Dissemination 12 / 15 / 2015	
Mailing Address 1745 Timber Wolf Dr.		Amount 375.00	
City North Liberty	State IA	Zip Code 52317	
Purpose of Expenditure fundraising calls		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5567	

Full Name (Last, First, Middle Initial) of Payee Jim McClanahan		Date of Public Distribution/Dissemination 12 / 15 / 2015	
Mailing Address 1745 Timber Wolf Dr.		Amount 375.00	
City North Liberty	State IA	Zip Code 52317	
Purpose of Expenditure fundraising calls		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5568	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1125.00
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Mobile		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 51-63 8th Avenue		Amount 2.63	
City New York	State NY	Zip Code 10014	Transaction ID : F57.5422
Purpose of Expenditure gas to drive to conference	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7879.91		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mobile		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 51-63 8th Avenue		Amount 2.63	
City New York	State NY	Zip Code 10014	Transaction ID : F57.5424
Purpose of Expenditure gas to drive to conference	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 8083.58		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mobile		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 51-63 8th Avenue		Amount 2.63	
City New York	State NY	Zip Code 10014	Transaction ID : F57.5425
Purpose of Expenditure gas to drive to conference	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7821.17		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	7.89
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Mobile		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 51-63 8th Avenue		Amount 2.63	
City New York	State NY	Zip Code 10014	Transaction ID : F57.5426
Purpose of Expenditure gas to drive to conference	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7811.91		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Pacific Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 30 / 2015	
Mailing Address 1002 South Second St.		Amount 184.88	
City San Jose	State CA	Zip Code 95112	Transaction ID : F57.5378
Purpose of Expenditure printing materials for outreach	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: CA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 467.30		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Pitney Bowes		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address Attn: Box 371887, 500 Ross St. Suite 154-0470		Amount 126.40	
City Pittsburgh	State PA	Zip Code 15262	Transaction ID : F57.5380
Purpose of Expenditure postage to send canvassing supplies	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6903.99		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	313.91
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Pitney Bowes		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address Attn: Box 371887, 500 Ross St. Suite 154-0470		Amount 126.40	
City Pittsburgh	State PA	Zip Code 15262	
Purpose of Expenditure postage to send canvassing supplies		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 7107.66	

Transaction ID : F57.5381

Full Name (Last, First, Middle Initial) of Payee Pitney Bowes		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address Attn: Box 371887, 500 Ross St. Suite 154-0470		Amount 126.40	
City Pittsburgh	State PA	Zip Code 15262	
Purpose of Expenditure postage to send canvassing supplies		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 6845.25	

Transaction ID : F57.5382

Full Name (Last, First, Middle Initial) of Payee Pitney Bowes		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address Attn: Box 371887, 500 Ross St. Suite 154-0470		Amount 126.40	
City Pittsburgh	State PA	Zip Code 15262	
Purpose of Expenditure postage to send canvassing supplies		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016 6835.99	

Transaction ID : F57.5383

(a) SUBTOTAL of Itemized Independent Expenditures.....	379.20
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Pitney Bowes		Date of Public Distribution/Dissemination 12 / 01 / 2015	
Mailing Address Attn: Box 371887, 500 Ross St. Suite 154-0470		Amount 43.84	
City Pittsburgh	State PA	Zip Code 15262	
Purpose of Expenditure postage to send organizing materials		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11714.39		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5524

Full Name (Last, First, Middle Initial) of Payee Pitney Bowes		Date of Public Distribution/Dissemination 12 / 01 / 2015	
Mailing Address Attn: Box 371887, 500 Ross St. Suite 154-0470		Amount 43.84	
City Pittsburgh	State PA	Zip Code 15262	
Purpose of Expenditure postage to send organizing materials		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11918.06		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5525

Full Name (Last, First, Middle Initial) of Payee Pitney Bowes		Date of Public Distribution/Dissemination 12 / 01 / 2015	
Mailing Address Attn: Box 371887, 500 Ross St. Suite 154-0470		Amount 43.84	
City Pittsburgh	State PA	Zip Code 15262	
Purpose of Expenditure postage to send organizing materials		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11655.65		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5526

(a) **SUBTOTAL** of Itemized Independent Expenditures.....▶ 131.52

(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Pitney Bowes		Date of Public Distribution/Dissemination 12 / 01 / 2015	
Mailing Address Attn: Box 371887, 500 Ross St. Suite 154-0470		Amount 43.84	
City Pittsburgh	State PA	Zip Code 15262	
Purpose of Expenditure postage to send organizing materials		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11646.39		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5527

Full Name (Last, First, Middle Initial) of Payee Post Office		Date of Public Distribution/Dissemination 12 / 02 / 2015	
Mailing Address 421 8th Avenue		Amount 298.65	
City New York	State NY	Zip Code 10199	
Purpose of Expenditure postage - fundraising		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 12013.04		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5528

Full Name (Last, First, Middle Initial) of Payee Post Office		Date of Public Distribution/Dissemination 12 / 02 / 2015	
Mailing Address 421 8th Avenue		Amount 298.65	
City New York	State NY	Zip Code 10199	
Purpose of Expenditure postage - fundraising		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 12216.71		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.5529

(a) SUBTOTAL of Itemized Independent Expenditures.....	641.14
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Post Office		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2015	
Mailing Address 421 8th Avenue		Amount 298.65	
City	State	Zip Code	Transaction ID : F57.5530
New York	NY	10199	
Purpose of Expenditure postage - fundraising	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		11954.30	

Full Name (Last, First, Middle Initial) of Payee Post Office		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2015	
Mailing Address 421 8th Avenue		Amount 298.65	
City	State	Zip Code	Transaction ID : F57.5531
New York	NY	10199	
Purpose of Expenditure postage - fundraising	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		11945.04	

Full Name (Last, First, Middle Initial) of Payee Post Office		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2015	
Mailing Address 421 8th Avenue		Amount 352.26	
City	State	Zip Code	Transaction ID : F57.5536
New York	NY	10199	
Purpose of Expenditure postage for periodical	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		12589.74	

(a) SUBTOTAL of Itemized Independent Expenditures.....	949.56
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Post Office		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2015	
Mailing Address 421 8th Avenue		Amount 352.26	
City	State	Zip Code	Transaction ID : F57.5537
New York	NY	10199	
Purpose of Expenditure postage for periodical	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		12793.41	

Full Name (Last, First, Middle Initial) of Payee Post Office		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2015	
Mailing Address 421 8th Avenue		Amount 352.26	
City	State	Zip Code	Transaction ID : F57.5538
New York	NY	10199	
Purpose of Expenditure postage for periodical	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		12531.00	

Full Name (Last, First, Middle Initial) of Payee Post Office		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2015	
Mailing Address 421 8th Avenue		Amount 352.26	
City	State	Zip Code	Transaction ID : F57.5539
New York	NY	10199	
Purpose of Expenditure postage for periodical	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		12521.74	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1056.78
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Prestige Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 6727 11th Avenue		Amount 166.31	
City Brooklyn	State NY	Zip Code 11219	
Purpose of Expenditure printing fundraising response cards		Category/ Type	Transaction ID : F57.5315
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		Amount 5228.46	

Full Name (Last, First, Middle Initial) of Payee Prestige Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 6727 11th Avenue		Amount 166.31	
City Brooklyn	State NY	Zip Code 11219	
Purpose of Expenditure printing fundraising response cards		Category/ Type	Transaction ID : F57.5316
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		Amount 5432.13	

Full Name (Last, First, Middle Initial) of Payee Prestige Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 6727 11th Avenue		Amount 166.31	
City Brooklyn	State NY	Zip Code 11219	
Purpose of Expenditure printing fundraising response cards		Category/ Type	Transaction ID : F57.5317
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		Amount 5169.72	

(a) SUBTOTAL of Itemized Independent Expenditures.....	498.93
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Prestige Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 6727 11th Avenue		Amount 166.31	
City Brooklyn	State NY	Zip Code 11219	
Purpose of Expenditure printing fundraising response cards		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		5160.46	

Transaction ID : F57.5318

Full Name (Last, First, Middle Initial) of Payee Prestige Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 25 / 2015	
Mailing Address 6727 11th Avenue		Amount 178.28	
City Brooklyn	State NY	Zip Code 11219	
Purpose of Expenditure printing fundraising response cards		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		10961.50	

Transaction ID : F57.5492

Full Name (Last, First, Middle Initial) of Payee Prestige Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 25 / 2015	
Mailing Address 6727 11th Avenue		Amount 178.28	
City Brooklyn	State NY	Zip Code 11219	
Purpose of Expenditure printing fundraising response cards		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		11165.17	

Transaction ID : F57.5493

(a) SUBTOTAL of Itemized Independent Expenditures.....	522.87
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Prestige Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 25 / 2015	
Mailing Address 6727 11th Avenue		Amount 178.28	
City Brooklyn	State NY	Zip Code 11219	
Purpose of Expenditure printing fundraising response cards		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		10902.76	

Transaction ID : F57.5494

Full Name (Last, First, Middle Initial) of Payee Prestige Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 25 / 2015	
Mailing Address 6727 11th Avenue		Amount 178.28	
City Brooklyn	State NY	Zip Code 11219	
Purpose of Expenditure printing fundraising response cards		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		10893.50	

Transaction ID : F57.5495

Full Name (Last, First, Middle Initial) of Payee Prestige Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 25 / 2015	
Mailing Address 6727 11th Avenue		Amount 345.28	
City Brooklyn	State NY	Zip Code 11219	
Purpose of Expenditure printing letterhead for fundraising mailing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		11306.78	

Transaction ID : F57.5496

(a) SUBTOTAL of Itemized Independent Expenditures.....	701.84
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Prestige Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 25 / 2015	
Mailing Address 6727 11th Avenue		Amount 345.28	
City Brooklyn	State NY	Zip Code 11219	
Purpose of Expenditure printing letterhead for fundraising mailing		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5497	

Full Name (Last, First, Middle Initial) of Payee Prestige Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 25 / 2015	
Mailing Address 6727 11th Avenue		Amount 345.28	
City Brooklyn	State NY	Zip Code 11219	
Purpose of Expenditure printing letterhead for fundraising mailing		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5498	

Full Name (Last, First, Middle Initial) of Payee Prestige Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 25 / 2015	
Mailing Address 6727 11th Avenue		Amount 345.28	
City Brooklyn	State NY	Zip Code 11219	
Purpose of Expenditure printing letterhead for fundraising mailing		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5499	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1035.84
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Quickstop Printing		Date of Public Distribution/Dissemination 10 / 01 / 2015	
Mailing Address 340 Shrewsbury Street		Amount 10.63	
City Worcester	State MA	Zip Code 01604	
Purpose of Expenditure printing signs		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5022	

Full Name (Last, First, Middle Initial) of Payee Saddle Burr Productions, Inc.		Date of Public Distribution/Dissemination 10 / 21 / 2015	
Mailing Address 81 San Marcos St.		Amount 1557.06	
City Austin	State TX	Zip Code 78702	
Purpose of Expenditure travel and lodging costs for speaker		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5360	

Full Name (Last, First, Middle Initial) of Payee Saddle Burr Productions, Inc.		Date of Public Distribution/Dissemination 10 / 22 / 2015	
Mailing Address 81 San Marcos St.		Amount 1100.00	
City Austin	State TX	Zip Code 78702	
Purpose of Expenditure travel and lodging costs for speaker		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5364	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2667.69
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Staples		Date of Public Distribution/Dissemination 12 / 19 / 2015	
Mailing Address 742 S. Meadow St. #2		Amount 5.86	
City Ithaca	State NY	Zip Code 14850	
Purpose of Expenditure paper and toner for copying		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NY District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		3804.80	

Transaction ID : F57.5604

Full Name (Last, First, Middle Initial) of Payee Staples		Date of Public Distribution/Dissemination 12 / 19 / 2015	
Mailing Address 742 S. Meadow St. #2		Amount 8.80	
City Ithaca	State NY	Zip Code 14850	
Purpose of Expenditure paper and toner for copying		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NY District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		3813.60	

Transaction ID : F57.5605

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination 10 / 08 / 2015	
Mailing Address PO Box 689020,		Amount 21.23	
City Des Moines	State IA	Zip Code 50368	
Purpose of Expenditure paper for copying materials for organizing		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		6079.47	

Transaction ID : F57.5332

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.89
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2015	
Mailing Address PO Box 689020,		Amount 21.23	
City Des Moines	State IA	Zip Code 50368	Transaction ID : F57.5333
Purpose of Expenditure paper for copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6283.14		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2015	
Mailing Address PO Box 689020,		Amount 21.23	
City Des Moines	State IA	Zip Code 50368	Transaction ID : F57.5334
Purpose of Expenditure paper for copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6020.73		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2015	
Mailing Address PO Box 689020,		Amount 21.23	
City Des Moines	State IA	Zip Code 50368	Transaction ID : F57.5335
Purpose of Expenditure paper for copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6011.47		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	63.69
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2015	
Mailing Address PO Box 689020,		Amount 5.26	
City Des Moines	State IA	Zip Code 50368	
Purpose of Expenditure paper for copying materials for organizing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		Transaction ID : F57.5404	

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2015	
Mailing Address PO Box 689020,		Amount 5.26	
City Des Moines	State IA	Zip Code 50368	
Purpose of Expenditure paper for copying materials for organizing		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		Transaction ID : F57.5405	

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2015	
Mailing Address PO Box 689020,		Amount 5.26	
City Des Moines	State IA	Zip Code 50368	
Purpose of Expenditure paper for copying materials for organizing		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		Transaction ID : F57.5406	

(a) SUBTOTAL of Itemized Independent Expenditures.....	15.78
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2015	
Mailing Address PO Box 689020,		Amount 5.26	
City Des Moines	State IA	Zip Code 50368	
Purpose of Expenditure paper for copying materials for organizing		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
		Transaction ID : F57.5407	

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address PO Box 689020,		Amount 41.95	
City Des Moines	State IA	Zip Code 50368	
Purpose of Expenditure office supplies for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
		Transaction ID : F57.5418	

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address PO Box 689020,		Amount 41.95	
City Des Moines	State IA	Zip Code 50368	
Purpose of Expenditure office supplies for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
		Transaction ID : F57.5419	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	89.16
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address PO Box 689020,		Amount 41.95	
City Des Moines	State IA	Zip Code 50368	
Purpose of Expenditure office supplies for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		7818.54	

Transaction ID : F57.5420

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address PO Box 689020,		Amount 41.95	
City Des Moines	State IA	Zip Code 50368	
Purpose of Expenditure office supplies for conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		7809.28	

Transaction ID : F57.5421

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 05 / 2015	
Mailing Address PO Box 689020,		Amount 36.43	
City Des Moines	State IA	Zip Code 50368	
Purpose of Expenditure paper for copying materials for organizing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		12816.35	

Transaction ID : F57.5553

(a) SUBTOTAL of Itemized Independent Expenditures.....	120.33
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 05 / 2015	
Mailing Address PO Box 689020,		Amount 36.43	
City Des Moines	State IA	Zip Code 50368	Transaction ID : F57.5554
Purpose of Expenditure paper for copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		13020.02	

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 05 / 2015	
Mailing Address PO Box 689020,		Amount 36.43	
City Des Moines	State IA	Zip Code 50368	Transaction ID : F57.5555
Purpose of Expenditure paper for copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		12757.61	

Full Name (Last, First, Middle Initial) of Payee Staples, Dept 51-7811326924		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 05 / 2015	
Mailing Address PO Box 689020,		Amount 36.43	
City Des Moines	State IA	Zip Code 50368	Transaction ID : F57.5556
Purpose of Expenditure paper for copying materials for organizing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		12748.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	109.29
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 211.37	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5348
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Calendar Year-To-Date Per Election for Office Sought		6352.90	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 211.37	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5349
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought		6556.57	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 211.37	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5350
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought		6294.16	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	634.11
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination 10 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 211.37	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5351
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6284.90		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination 10 / 29 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 163.33	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5370
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6696.97		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination 10 / 29 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 163.33	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5371
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6900.64		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	538.03
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 163.33	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6638.23		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 163.33	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6628.97		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 14 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 204.16	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 10293.55		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	530.82
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 14 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 204.16	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5468
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 14 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 204.16	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5469
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 14 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 204.16	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Transaction ID : F57.5470
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

(a) SUBTOTAL of Itemized Independent Expenditures.....	612.48
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 235.39	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		11615.23	

Transaction ID : F57.5516

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 235.39	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		11818.90	

Transaction ID : F57.5517

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 235.39	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		11556.49	

Transaction ID : F57.5518

(a) SUBTOTAL of Itemized Independent Expenditures.....	706.17
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 235.39	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		Transaction ID : F57.5519	

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 187.35	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		Transaction ID : F57.5574	

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 187.35	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure salary (w/ taxes & benefits)		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		Transaction ID : F57.5575	

(a) SUBTOTAL of Itemized Independent Expenditures.....	610.09
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination 12 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 187.35	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5576
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13868.76		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination 12 / 15 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 187.35	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5577
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13859.50		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination 12 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 36.03	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5592
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14087.85		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	410.73
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination 12 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 36.03	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5593
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14291.52		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination 12 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 36.03	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5594
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14029.11		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maria Svart		Date of Public Distribution/Dissemination 12 / 30 / 2015	
Mailing Address 75 Maiden Lane Suite 702		Amount 36.03	
City New York	State NY	Zip Code 10038	Transaction ID : F57.5595
Purpose of Expenditure salary (w/ taxes & benefits)	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14019.85		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	108.09
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Tecre Co.		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 19 / 2015	
Mailing Address W5747 Lost Arrow Road		Amount 39.10	
City Fod du Lac	State WI	Zip Code 54937	Transaction ID : F57.5480
Purpose of Expenditure promotional buttons	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 10509.56		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tecre Co.		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 19 / 2015	
Mailing Address W5747 Lost Arrow Road		Amount 39.10	
City Fod du Lac	State WI	Zip Code 54937	Transaction ID : F57.5481
Purpose of Expenditure promotional buttons	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 10713.23		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tecre Co.		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 19 / 2015	
Mailing Address W5747 Lost Arrow Road		Amount 39.10	
City Fod du Lac	State WI	Zip Code 54937	Transaction ID : F57.5482
Purpose of Expenditure promotional buttons	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 10450.82		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	117.30
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Tecre Co.		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 19 / 2015	
Mailing Address W5747 Lost Arrow Road		Amount 39.10	
City Fod du Lac	State WI	Zip Code 54937	
Purpose of Expenditure promotional buttons		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		Transaction ID : F57.5483	

Full Name (Last, First, Middle Initial) of Payee TM Design Corporation		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 1916 Lyell Ave.		Amount 362.83	
City Rochester	State NY	Zip Code 14606	
Purpose of Expenditure promotional t-shirts		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		Transaction ID : F57.5327	

Full Name (Last, First, Middle Initial) of Payee TM Design Corporation		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 1916 Lyell Ave.		Amount 362.83	
City Rochester	State NY	Zip Code 14606	
Purpose of Expenditure promotional t-shirts		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		Transaction ID : F57.5329	

(a) SUBTOTAL of Itemized Independent Expenditures.....	764.76
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee TM Design Corporation		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 1916 Lyell Ave.		Amount 362.83	
City Rochester	State NY	Zip Code 14606	
Purpose of Expenditure promotional t-shirts		Category/ Type	Office Sought: <input type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		5999.50	

Transaction ID : F57.5330

Full Name (Last, First, Middle Initial) of Payee TM Design Corporation		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address 1916 Lyell Ave.		Amount 362.83	
City Rochester	State NY	Zip Code 14606	
Purpose of Expenditure promotional t-shirts		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		5990.24	

Transaction ID : F57.5331

Full Name (Last, First, Middle Initial) of Payee TM Design Corporation		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 19 / 2015	
Mailing Address 1916 Lyell Ave.		Amount 177.24	
City Rochester	State NY	Zip Code 14606	
Purpose of Expenditure promotional t-shirts		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		10686.80	

Transaction ID : F57.5484

(a) SUBTOTAL of Itemized Independent Expenditures.....	902.90
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee TM Design Corporation		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 19 / 2015	
Mailing Address 1916 Lyell Ave.		Amount 177.24	
City Rochester	State NY	Zip Code 14606	
Purpose of Expenditure promotional t-shirts		Category/ Type	Transaction ID : F57.5485
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		Amount 10890.47	

Full Name (Last, First, Middle Initial) of Payee TM Design Corporation		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 19 / 2015	
Mailing Address 1916 Lyell Ave.		Amount 177.24	
City Rochester	State NY	Zip Code 14606	
Purpose of Expenditure promotional t-shirts		Category/ Type	Transaction ID : F57.5486
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		Amount 10628.06	

Full Name (Last, First, Middle Initial) of Payee TM Design Corporation		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 19 / 2015	
Mailing Address 1916 Lyell Ave.		Amount 177.24	
City Rochester	State NY	Zip Code 14606	
Purpose of Expenditure promotional t-shirts		Category/ Type	Transaction ID : F57.5487
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		Amount 10618.80	

(a) SUBTOTAL of Itemized Independent Expenditures.....	531.72
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Tri-Star Offset Corp.		Date of Public Distribution/Dissemination 12 / 02 / 2015	
Mailing Address 60- 20 59th Place		Amount 224.44	
City Maspeth	State NY	Zip Code 11378	Transaction ID : F57.5532
Purpose of Expenditure printing periodical	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tri-Star Offset Corp.		Date of Public Distribution/Dissemination 12 / 02 / 2015	
Mailing Address 60- 20 59th Place		Amount 224.44	
City Maspeth	State NY	Zip Code 11378	Transaction ID : F57.5533
Purpose of Expenditure printing periodical	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tri-Star Offset Corp.		Date of Public Distribution/Dissemination 12 / 02 / 2015	
Mailing Address 60- 20 59th Place		Amount 224.44	
City Maspeth	State NY	Zip Code 11378	Transaction ID : F57.5534
Purpose of Expenditure printing periodical	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	673.32
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Tri-Star Offset Corp.		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2015	
Mailing Address 60- 20 59th Place		Amount 224.44	
City Maspeth	State NY	Zip Code 11378	
Purpose of Expenditure printing periodical		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5535	

Full Name (Last, First, Middle Initial) of Payee Turkey Hill		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 829 N. Center Avenue		Amount 3.36	
City Somerset	State PA	Zip Code 15501	
Purpose of Expenditure gas to drive to conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5427	

Full Name (Last, First, Middle Initial) of Payee Turkey Hill		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 829 N. Center Avenue		Amount 3.36	
City Somerset	State PA	Zip Code 15501	
Purpose of Expenditure gas to drive to conference		Category/ Type	Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.5429	

(a) SUBTOTAL of Itemized Independent Expenditures.....	231.16
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Turkey Hill		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 829 N. Center Avenue		Amount 3.36	
City Somerset	State PA	Zip Code 15501	
Purpose of Expenditure gas to drive to conference		Category/ Type	Transaction ID : F57.5430
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought 7824.53		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Turkey Hill		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 829 N. Center Avenue		Amount 3.36	
City Somerset	State PA	Zip Code 15501	
Purpose of Expenditure gas to drive to conference		Category/ Type	Transaction ID : F57.5431
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Calendar Year-To-Date Per Election for Office Sought 7815.27		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee United Envelope LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2015	
Mailing Address PO Box 951431		Amount 150.52	
City Cleveland	State OH	Zip Code 44193	
Purpose of Expenditure printing for fundraising and engagement mailing		Category/ Type	Transaction ID : F57.5310
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Calendar Year-To-Date Per Election for Office Sought 5062.15		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	157.24
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee United Envelope LLC		Date of Public Distribution/Dissemination 10 / 02 / 2015	
Mailing Address PO Box 951431		Amount 150.52	
City Cleveland	State OH	Zip Code 44193	
Purpose of Expenditure printing for fundraising and engagement mailing		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		5265.82	

Transaction ID : F57.5312

Full Name (Last, First, Middle Initial) of Payee United Envelope LLC		Date of Public Distribution/Dissemination 10 / 02 / 2015	
Mailing Address PO Box 951431		Amount 150.52	
City Cleveland	State OH	Zip Code 44193	
Purpose of Expenditure printing for fundraising and engagement mailing		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		5003.41	

Transaction ID : F57.5313

Full Name (Last, First, Middle Initial) of Payee United Envelope LLC		Date of Public Distribution/Dissemination 10 / 02 / 2015	
Mailing Address PO Box 951431		Amount 150.52	
City Cleveland	State OH	Zip Code 44193	
Purpose of Expenditure printing for fundraising and engagement mailing		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		4994.15	

Transaction ID : F57.5314

(a) SUBTOTAL of Itemized Independent Expenditures.....	451.56
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee United Envelope LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 25 / 2015	
Mailing Address PO Box 951431		Amount 96.42	
City Cleveland	State OH	Zip Code 44193	
Purpose of Expenditure printing for fundraising mailing		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		10783.22	

Transaction ID : F57.5488

Full Name (Last, First, Middle Initial) of Payee United Envelope LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 25 / 2015	
Mailing Address PO Box 951431		Amount 96.42	
City Cleveland	State OH	Zip Code 44193	
Purpose of Expenditure printing for fundraising mailing		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		10986.89	

Transaction ID : F57.5489

Full Name (Last, First, Middle Initial) of Payee United Envelope LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 25 / 2015	
Mailing Address PO Box 951431		Amount 96.42	
City Cleveland	State OH	Zip Code 44193	
Purpose of Expenditure printing for fundraising mailing		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		10724.48	

Transaction ID : F57.5490

(a) SUBTOTAL of Itemized Independent Expenditures.....	289.26
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee United Envelope LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 25 / 2015	
Mailing Address PO Box 951431		Amount 96.42	
City Cleveland	State OH	Zip Code 44193	Transaction ID : F57.5491
Purpose of Expenditure printing for fundraising mailing	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 10715.22		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ocala Wings		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address 3326 Wintergreen Dr.		Amount 540.13	
City Iowa City	State IA	Zip Code 52240	Transaction ID : F57.5393
Purpose of Expenditure fundraising calls	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7809.49		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ocala Wings		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address 3326 Wintergreen Dr.		Amount 540.13	
City Iowa City	State IA	Zip Code 52240	Transaction ID : F57.5394
Purpose of Expenditure fundraising calls	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 8013.16		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1176.68
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Ocala Wings		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address 3326 Wintergreen Dr.		Amount 540.13	
City Iowa City	State IA	Zip Code 52240	Transaction ID : F57.5395
Purpose of Expenditure fundraising calls	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7750.75		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ocala Wings		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2015	
Mailing Address 3326 Wintergreen Dr.		Amount 540.13	
City Iowa City	State IA	Zip Code 52240	Transaction ID : F57.5396
Purpose of Expenditure fundraising calls	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7741.49		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ocala Wings		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 15 / 2015	
Mailing Address 3326 Wintergreen Dr.		Amount 375.00	
City Iowa City	State IA	Zip Code 52240	Transaction ID : F57.5569
Purpose of Expenditure fundraising calls	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13740.15		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1455.26
(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)  
Democratic Socialists of America, Inc.

Full Name (Last, First, Middle Initial) of Payee Ocala Wings		Date of Public Distribution/Dissemination 12 / 15 / 2015	
Mailing Address 3326 Wintergreen Dr.		Amount 375.00	
City Iowa City	State IA	Zip Code 52240	
Purpose of Expenditure fundraising calls		Category/ Type	Transaction ID : F57.5570
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought 13943.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ocala Wings		Date of Public Distribution/Dissemination 12 / 15 / 2015	
Mailing Address 3326 Wintergreen Dr.		Amount 375.00	
City Iowa City	State IA	Zip Code 52240	
Purpose of Expenditure fundraising calls		Category/ Type	Transaction ID : F57.5571
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____
Calendar Year-To-Date Per Election for Office Sought 13681.41		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ocala Wings		Date of Public Distribution/Dissemination 12 / 15 / 2015	
Mailing Address 3326 Wintergreen Dr.		Amount 375.00	
City Iowa City	State IA	Zip Code 52240	
Purpose of Expenditure fundraising calls		Category/ Type	Transaction ID : F57.5573
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: SC District: _____
Calendar Year-To-Date Per Election for Office Sought 13672.15		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	1125.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	43722.30