

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) National Nurses United for Patient Protection
FEC IDENTIFICATION NUMBER C C00490375
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Bus Bank
Mailing Address 820 West Jackson Suite 815
City Chicago State IL Zip Code 60607
Purpose of Expenditure Bus tour expenses
Name of Federal Candidate Bernie Sanders
Calendar Year-To-Date Per Election for Office Sought 140317.10

Date of Public Distribution/Dissemination 01 / 04 / 2016
Amount 120635.00
Transaction ID : D691806
Date of Disbursement or Obligation 12 / 22 / 2015
Office Sought: House District: 00
President Senate State: DC
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Alliance Graphics
Mailing Address 1101 8th Street
City Berkeley State CA Zip Code 94710
Purpose of Expenditure Printing
Name of Federal Candidate Bernie Sanders
Calendar Year-To-Date Per Election for Office Sought 140317.10

Date of Public Distribution/Dissemination 01 / 04 / 2016
Amount 1780.02
Transaction ID : D691807
Date of Disbursement or Obligation 12 / 28 / 2015
Office Sought: House District: 00
President Senate State: DC
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 122415.02
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Signature Carolyn Hietamaki [Electronically Filed] Date 01 / 04 / 2016

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Full Name of Payee Alliance Graphics
Mailing Address 1101 8th Street
City Berkeley State CA Zip Code 94710
Purpose of Expenditure Printing Category/Type

Date of Public Distribution/Dissemination 01 / 04 / 2016
Amount 3675.13
Transaction ID : D691808
Date of Disbursement or Obligation 12 / 28 / 2015

Name of Federal Candidate Bernie Sanders
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 140317.10

Office Sought: House District: 00
President Senate State: DC
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Autumn Press
Mailing Address 945 Camelia St
City Berkeley State CA Zip Code 94710-1437
Purpose of Expenditure Printing Category/Type

Date of Public Distribution/Dissemination 01 / 04 / 2016
Amount 11940.00
Transaction ID : D691809
Date of Disbursement or Obligation 12 / 28 / 2015

Name of Federal Candidate Bernie Sanders
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 140317.10

Office Sought: House District: 00
President Senate State: DC
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 15615.13
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Carolyn Hietamaki [Electronically Filed] Date 01 / 04 / 2016
Signature

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Full Name of Payee Autumn Press
Mailing Address 945 Camelia St
City Berkeley State CA Zip Code 94710-1437
Purpose of Expenditure Printing
Name of Federal Candidate BERNARD SANDERS Support Oppose

Date of Public Distribution/Dissemination 01 / 04 / 2016
Amount 9511.69
Transaction ID : D691810
Date of Disbursement or Obligation 12 / 28 / 2015
Office Sought: House District: 00 President Senate State: IA
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Autumn Press
Mailing Address 945 Camelia St
City Berkeley State CA Zip Code 94710-1437
Purpose of Expenditure Printing
Name of Federal Candidate Bernie Sanders Support Oppose

Date of Public Distribution/Dissemination 01 / 04 / 2016
Amount 1160.72
Transaction ID : D691811
Date of Disbursement or Obligation 12 / 28 / 2015
Office Sought: House District: 00 President Senate State: DC
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 10672.41
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Carolyn Hietamaki [Electronically Filed] Date 01 / 04 / 2016
Signature

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Full Name of Payee Alliance Graphics
Mailing Address 1101 8th Street
City Berkeley State CA Zip Code 94710
Purpose of Expenditure Printing
Name of Federal Candidate Bernie Sanders
Calendar Year-To-Date Per Election for Office Sought 140317.10

Date of Public Distribution/Dissemination 01 / 04 / 2016
Amount 1126.23
Transaction ID : D691812
Date of Disbursement or Obligation 12 / 29 / 2015
Office Sought: President
Disbursement For: Primary

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Name of Federal Candidate
Calendar Year-To-Date Per Election for Office Sought

Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation
Office Sought:
Disbursement For:

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1126.23, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 149828.79

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature Carolyn Hietamaki [Electronically Filed] Date 01 / 04 / 2016