

# 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>Working America</b>		3. FEC Identification Number <b>C</b> C90011156
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 815 16th St. NW		
(c) City, State and ZIP Code Washington DC 20006		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

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

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

M M M	/	D D D	/	Y Y Y Y Y Y
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5. COVERING PERIOD:

FROM	M M M	/	D D D	/	Y Y Y Y Y Y
	09		08		2016
THROUGH	M M M	/	D D D	/	Y Y Y Y Y Y
	09		09		2016

6. TOTAL CONTRIBUTIONS.....	0.00
7. TOTAL INDEPENDENT EXPENDITURES .....	127128.32

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

**TYPE OR PRINT NAME OF PERSON COMPLETING FORM**

**SIGNATURE**

**DATE**

*[Electronically Filed]*

Mr. James Cobb Jr.

*Mr. James Cobb Jr.*

09/10/2016

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-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA350H0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA351A7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA353X1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA354P9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Samuel Abraham		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5543 Minaret Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32821-8120	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA342D5
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought 5628.98		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Samuel Abraham		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5543 Minaret Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32821-8120	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA343X4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Pedro Acosta		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3827 N Franklin St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19140-3228	Transaction ID : VN7CZA33Z14
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Pedro Acosta		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3827 N Franklin St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19140-3228	Transaction ID : VN7CZA34033
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Stefan Adams		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2746 Atwood Ter		Amount 68.40	
City Columbus	State OH	Zip Code 43211-1108	Transaction ID : VN7CZA34A92
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Stefan Adams		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2746 Atwood Ter		Amount 68.40	
City Columbus	State OH	Zip Code 43211-1108	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Full Name (Last, First, Middle Initial) of Payee William Allen		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3431 1st Ave		Amount 68.40	
City Urbancrest	State OH	Zip Code 43123-1311	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee William Allen		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3431 1st Ave		Amount 68.40	
City Urbancrest	State OH	Zip Code 43123-1311	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Noah Alloy		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 973 Mount Vernon Ave Apt A		Amount 68.40	
City Columbus	State OH	Zip Code 43203-1573	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34AB8

Full Name (Last, First, Middle Initial) of Payee Noah Alloy		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 973 Mount Vernon Ave Apt A		Amount 68.40	
City Columbus	State OH	Zip Code 43203-1573	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34BE1

Full Name (Last, First, Middle Initial) of Payee Alvaro Alva		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2313 N Park Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4512	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33YD6

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Alvaro Alva		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2313 N Park Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA33ZF5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee Ryan Anders		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1954 Amato Dr		Amount 45.60	
City North Versailles	State PA	Zip Code 15137-2735	Transaction ID : VN7CZA34KN5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Ryan Anders		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1954 Amato Dr		Amount 22.80	
City North Versailles	State PA	Zip Code 15137-2735	Transaction ID : VN7CZA34MR0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ryan Anders		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1954 Amato Dr		Amount 22.80	
City North Versailles	State PA	Zip Code 15137-2735	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34NV6
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		126851.89	

Full Name (Last, First, Middle Initial) of Payee Ryan Anders		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1954 Amato Dr		Amount 45.60	
City North Versailles	State PA	Zip Code 15137-2735	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34PY3
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		126851.89	

Full Name (Last, First, Middle Initial) of Payee John Anderson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 714 Watt Ln		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15219-4218	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34KX8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee John Anderson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 714 Watt Ln		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15219-4218	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34N03

Full Name (Last, First, Middle Initial) of Payee John Anderson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 714 Watt Ln		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15219-4218	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34P39

Full Name (Last, First, Middle Initial) of Payee John Anderson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 714 Watt Ln		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15219-4218	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34Q64

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Lyric Anderson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3242 N 6th St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19140-5643	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33YH8

Full Name (Last, First, Middle Initial) of Payee Lyric Anderson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3242 N 6th St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19140-5643	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33ZK6

Full Name (Last, First, Middle Initial) of Payee Andreka Wilkes		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12750 S Union Ave		Amount 17.46	
City Chicago	State IL	Zip Code 60628-7043	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA345Q1

(a) SUBTOTAL of Itemized Independent Expenditures.....	154.26
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Andreka Wilkes		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12750 S Union Ave		Amount 17.46	
City Chicago	State IL	Zip Code 60628-7043	Transaction ID : VN7CZA34643
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		40940.56	

Full Name (Last, First, Middle Initial) of Payee Angela Oliver		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 47515 S Vincennes Ave Apt 2		Amount 72.67	
City Chicago	State IL	Zip Code 60643	Transaction ID : VN7CZA345C4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		40940.56	

Full Name (Last, First, Middle Initial) of Payee Angela Oliver		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 47515 S Vincennes Ave Apt 2		Amount 72.67	
City Chicago	State IL	Zip Code 60643	Transaction ID : VN7CZA345T4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		40940.56	

(a) SUBTOTAL of Itemized Independent Expenditures.....	162.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Carlos Badaraco		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 34.20	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA34183
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Carlos Badaraco		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 34.20	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA342V6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jacob Baldwin		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 3633 Spring Garden St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19104-2351	Transaction ID : VN7CZA33YJ6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jacob Baldwin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3633 Spring Garden St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19104-2351	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA33ZM4	

Full Name (Last, First, Middle Initial) of Payee Voirel Barna, Jr.		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 11 Park Ave Ste 43		Amount 21.38	
City Willow Grove	State PA	Zip Code 19090-3208	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA33Z22	

Full Name (Last, First, Middle Initial) of Payee Voirel Barna, Jr.		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 11 Park Ave Ste 43		Amount 21.38	
City Willow Grove	State PA	Zip Code 19090-3208	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34041	

(a) SUBTOTAL of Itemized Independent Expenditures.....	111.16
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Andrea Barrow		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4088 Suffolk Rd		Amount 68.40	
City Cleveland	State OH	Zip Code 44121-2357	Transaction ID : VN7CZA346D4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Andrea Barrow		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4088 Suffolk Rd		Amount 68.40	
City Cleveland	State OH	Zip Code 44121-2357	Transaction ID : VN7CZA347R2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Barbara Battle		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7325 Beacon Hill Loop Apt 5		Amount 34.20	
City Orlando	State FL	Zip Code 32818-6426	Transaction ID : VN7CZA34169
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Barbara Battle		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7325 Beacon Hill Loop Apt 5		Amount 34.20	
City Orlando	State FL	Zip Code 32818-6426	Transaction ID : VN7CZA342S0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Catherine Battle		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 48 Good St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-2702	Transaction ID : VN7CZA33YF2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Catherine Battle		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 48 Good St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-2702	Transaction ID : VN7CZA33ZH0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Richard Beadling		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4225 1/2 Murray Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15217-2948	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34KH3

Full Name (Last, First, Middle Initial) of Payee Richard Beadling		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4225 1/2 Murray Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15217-2948	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34MM8

Full Name (Last, First, Middle Initial) of Payee Richard Beadling		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4225 1/2 Murray Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15217-2948	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34NQ4

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Richard Beadling		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4225 1/2 Murray Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15217-2948	Transaction ID : VN7CZA34PT1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Zoe Beale		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5539 Baynton St # 5547		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-2208	Transaction ID : VN7CZA33YK3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Zoe Beale		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5539 Baynton St # 5547		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-2208	Transaction ID : VN7CZA33ZN2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	182.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Begin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12050 Lake Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1892	Transaction ID : VN7CZA346X1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Begin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12050 Lake Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1892	Transaction ID : VN7CZA34889
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Austin Benjamin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1674 Monica St		Amount 34.20	
City Deltona	State FL	Zip Code 32725-3968	Transaction ID : VN7CZA341V3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Austin Benjamin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1674 Monica St		Amount 34.20	
City Deltona	State FL	Zip Code 32725-3968	Transaction ID : VN7CZA343D8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34RY6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34TK3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34W82
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34XX8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Genesson Beraut		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 906 Fenmdell Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA34191
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Genesson Berat		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 906 Fenmdell Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA342W4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thomas Berrian		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6714 Christopher Park Ln		Amount 68.40	
City Canal Winchester	State OH	Zip Code 43110-8510	Transaction ID : VN7CZA34AH5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thomas Berrian		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6714 Christopher Park Ln		Amount 68.40	
City Canal Winchester	State OH	Zip Code 43110-8510	Transaction ID : VN7CZA34BK1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Regina Berry		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34SM0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Regina Berry		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34V97
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Regina Berry		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34WY5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Regina Berry		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34YK2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ahmed Bilal		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA37604
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ahmed Bilal		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA37679
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ahmed Bilal		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA376W5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ahmed Bilal		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA37730
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Billy Lott		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1617 N Lorel Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60639-4313	Transaction ID : VN7CZA345N5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	104.95
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Billy Lott		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1617 N Lorel Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60639-4313	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34628

Full Name (Last, First, Middle Initial) of Payee Remington Birinyi		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 9505 Murray Ridge Rd		Amount 68.40	
City Elyria	State OH	Zip Code 44035-6964	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA346P6

Full Name (Last, First, Middle Initial) of Payee Remington Birinyi		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 9505 Murray Ridge Rd		Amount 68.40	
City Elyria	State OH	Zip Code 44035-6964	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34813

(a) SUBTOTAL of Itemized Independent Expenditures.....	196.15
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jawneisha Bland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3399 E 65th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44127-1952	Transaction ID : VN7CZA347A4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jawneisha Bland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3399 E 65th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44127-1952	Transaction ID : VN7CZA348N1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joshua Bland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1026 Jefferson Ave		Amount 68.40	
City Akron	State OH	Zip Code 44302-1046	Transaction ID : VN7CZA34746
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Joshua Bland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1026 Jefferson Ave		Amount 68.40	
City Akron	State OH	Zip Code 44302-1046	Transaction ID : VN7CZA348F4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mary Bonner		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3878 W 36th St Down		Amount 68.40	
City Cleveland	State OH	Zip Code 44109-2716	Transaction ID : VN7CZA346M0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mary Bonner		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3878 W 36th St Down		Amount 68.40	
City Cleveland	State OH	Zip Code 44109-2716	Transaction ID : VN7CZA347Z7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Clifton Bostick		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 4203 Hewitt St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2173	Transaction ID : VN7CZA375V4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Clifton Bostick		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 4203 Hewitt St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2173	Transaction ID : VN7CZA37629
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Clifton Bostick		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 4203 Hewitt St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2173	Transaction ID : VN7CZA376Q5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Clifton Bostick		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4203 Hewitt St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2173	Transaction ID : VN7CZA376Y1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2701 Chester Ave		Amount 14.86	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA34973
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2701 Chester Ave		Amount 15.46	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA34981
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	53.12
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2701 Chester Ave		Amount 10.49	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA34999
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2701 Chester Ave		Amount 19.06	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA349A7
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2701 Chester Ave		Amount 17.67	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA349B5
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	47.22
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2701 Chester Ave		Amount 14.86	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA349P2	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2701 Chester Ave		Amount 15.46	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA349Q0	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2701 Chester Ave		Amount 10.49	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA349R8	

(a) SUBTOTAL of Itemized Independent Expenditures.....	40.81
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2701 Chester Ave		Amount 19.06	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA349S6
Purpose of Expenditure Gas	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2701 Chester Ave		Amount 17.67	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA349T4
Purpose of Expenditure Gas	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 22.80	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA350S3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	59.53
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 22.80	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA351K8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 33651.35			

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 22.80	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA35462
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 648181.85			

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 22.80	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA354Y2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 648181.85			

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Benjamin Britt		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1424 Richmond Rd		Amount 68.40	
City Lyndhurst	State OH	Zip Code 44124-2460	Transaction ID : VN7CZA34754
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Benjamin Britt		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1424 Richmond Rd		Amount 68.40	
City Lyndhurst	State OH	Zip Code 44124-2460	Transaction ID : VN7CZA348G2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dasent Brown		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1209 Majestic Palm Ct		Amount 34.20	
City Apopka	State FL	Zip Code 32712-2455	Transaction ID : VN7CZA341Z5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Dasent Brown		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1209 Majestic Palm Ct		Amount 34.20	
City Apopka	State FL	Zip Code 32712-2455	Transaction ID : VN7CZA343F4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34Z54
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34Z62
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	54.09
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34Z70
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 18.39	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34Z88
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 11.68	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34Z96
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.91
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 11.37	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZA4
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZB2
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 8.87	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZC0
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.29
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 9.07	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34ZD7

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34ZE5

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34ZF3

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.17
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZG1
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZH9
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 18.39	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZJ7
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	34.07
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 11.68	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZK5
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 11.37	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZM3
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZN1
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.10
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 8.87	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34ZP9

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 9.07	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34ZQ6

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34ZR4

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.99
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZS2
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZT0
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZV8
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.73
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 18.39	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZW6
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 11.68	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZX4
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 11.37	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZY2
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.44
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA34ZZ0
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 8.87	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA35008
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 9.07	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA35015
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	29.99
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA35023
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA35031
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA35049
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.94
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA35057
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 18.39	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA35065
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 11.68	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA35073
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.91
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 11.37	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA35081
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA35099
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 8.87	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA350A7
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.29
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 9.07	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		434889.86	

Transaction ID : VN7CZA350B4

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		434889.86	

Transaction ID : VN7CZA350C2

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1 Belmont Ave		Amount 25.39	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		648181.85	

Transaction ID : VN7CZA340D2

(a) SUBTOTAL of Itemized Independent Expenditures.....	46.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.17	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA340E0

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.38	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA340F7

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1 Belmont Ave		Amount 23.53	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA340G5

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.38	
City Bala Cynwyd	State PA	Zip Code 19004-1617	Transaction ID : VN7CZA340H3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1 Belmont Ave		Amount 25.39	
City Bala Cynwyd	State PA	Zip Code 19004-1617	Transaction ID : VN7CZA340P3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.17	
City Bala Cynwyd	State PA	Zip Code 19004-1617	Transaction ID : VN7CZA340Q1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.94
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.38	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA340R9	

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1 Belmont Ave		Amount 23.53	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA340S6	

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.38	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA340T4	

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.29
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Chicago		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3721 N Broadway St		Amount 23.45	
City Chicago	State IL	Zip Code 60613-4104	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34651	

Full Name (Last, First, Middle Initial) of Payee Budget-Chicago		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3721 N Broadway St		Amount 27.05	
City Chicago	State IL	Zip Code 60613-4104	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34669	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 24.16	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA348X4	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.66
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA348Y2
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 22.80	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA348Z0
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA34908
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.42
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.24	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA34916
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.19	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA34924
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.84	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA34932
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	78.27
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA34940
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA34958
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.09	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA34966
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.71
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 24.16	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA349C3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA349D1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 22.80	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA349E9
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.27
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA349F7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.24	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA349G5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.19	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA349H2
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	77.74
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.84	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA349J0	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA349K8	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA349M6	

(a) SUBTOTAL of Itemized Independent Expenditures.....	77.46
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.09	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA349N4
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Columbus		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1030 W 3rd Ave		Amount 24.40	
City Columbus	State OH	Zip Code 43212-3128	Transaction ID : VN7CZA34C29
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Columbus		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1030 W 3rd Ave		Amount 25.88	
City Columbus	State OH	Zip Code 43212-3128	Transaction ID : VN7CZA34CA3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.37
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA37748
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA37756
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA37764
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA37772
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA377D9
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA377E7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA377F5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA377G3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA37882
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA37890
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA378A8
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA378B6
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		648181.85	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	21.84
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA378H0
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA378J8
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA378K6
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA378M4
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.56	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA344E7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.56	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA344F5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	34.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.87	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA344G3	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.56	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA344H0	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 8.58	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA344J8	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.01
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 8.58	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA344K6

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.73	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA344M4

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.56	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA344N2

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.87
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.51	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA344Z1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.51	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA34509
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 11.88	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA34517
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	36.90
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.51	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34525

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 7.92	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34533

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 7.92	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34541

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.35
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.67	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34558

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.51	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34566

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address Landside Terminal #4000		Amount 19.82	
City Pittsburgh	State PA	Zip Code 15231	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34QK6

(a) SUBTOTAL of Itemized Independent Expenditures.....	45.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 15.42	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34QM4

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 15.70	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34QN2

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 15.70	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34QP0

(a) SUBTOTAL of Itemized Independent Expenditures.....	46.82
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 15.70	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34QQ8

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 15.42	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34QR6

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address Landside Terminal #4000		Amount 9.91	
City Pittsburgh	State PA	Zip Code 15231	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34QV0

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.03
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 7.71	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34QW8

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 7.85	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34QX5

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 7.85	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34QY3

(a) SUBTOTAL of Itemized Independent Expenditures.....	23.41
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 7.85	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34QZ1

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 7.71	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34R09

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address Landside Terminal #4000		Amount 9.91	
City Pittsburgh	State PA	Zip Code 15231	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34R33

(a) SUBTOTAL of Itemized Independent Expenditures.....	25.47
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 7.71	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA34R41
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 7.85	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA34R59
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 7.85	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA34R67
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	23.41
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 7.85	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34R74

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 7.71	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34R82

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address Landside Terminal #4000		Amount 21.52	
City Pittsburgh	State PA	Zip Code 15231	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34RB6

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 16.75	
City Pittsburgh	State PA	Zip Code 15222-1417	Transaction ID : VN7CZA34RC4
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 17.04	
City Pittsburgh	State PA	Zip Code 15222-1417	Transaction ID : VN7CZA34RD2
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 17.04	
City Pittsburgh	State PA	Zip Code 15222-1417	Transaction ID : VN7CZA34RE0
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	50.83
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 17.04	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 625 Stanwix St		Amount 16.75	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	40.71
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 4.17	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34H29	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34H53	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 4.17	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34H95	

(a) SUBTOTAL of Itemized Independent Expenditures.....	15.26
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA34HT9
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 4.17	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA34HY1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA34J14
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	18.01
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 4.17	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34J56

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.73	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA355H2

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.65	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA355J0

(a) SUBTOTAL of Itemized Independent Expenditures.....	17.55
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.65	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA355K8
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.81	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA355M6
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.88	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA355N3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.34
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.88	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA355P1	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.57	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35642	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.48	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35650	

(a) SUBTOTAL of Itemized Independent Expenditures.....	17.93
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.48	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35668	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.67	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35676	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 3.24	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35684	

(a) SUBTOTAL of Itemized Independent Expenditures.....	18.39
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 3.24	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA35691
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.73	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA357T7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.65	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA357V4
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.62
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.65	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA357X0
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.81	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA357Y8
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.88	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA357Z6
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.34
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.88	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35812	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.73	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA358C9	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.65	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA358D7	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.26
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.65	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA358E5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.81	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA358F2
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.88	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA358G0
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.34
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.88	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 17.72	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 24.21	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	44.81
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 24.13	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34C53

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 23.80	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34C61

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 15.29	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34C79

(a) SUBTOTAL of Itemized Independent Expenditures.....	63.22
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 18.79	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Transaction ID : VN7CZA34CB0

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 25.67	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Transaction ID : VN7CZA34CC8

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 25.59	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Transaction ID : VN7CZA34CD6

(a) SUBTOTAL of Itemized Independent Expenditures.....	70.05
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 25.25	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34CE4	

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 16.22	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34CF2	

Full Name (Last, First, Middle Initial) of Payee Tyree Bullock		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 607 Homeland Ave		Amount 22.80	
City Durham	State NC	Zip Code 27707-4020	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35116	

(a) SUBTOTAL of Itemized Independent Expenditures.....	64.27
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tyree Bullock		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 607 Homeland Ave		Amount 22.80	
City Durham	State NC	Zip Code 27707-4020	Transaction ID : VN7CZA351X7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tyree Bullock		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 607 Homeland Ave		Amount 22.80	
City Durham	State NC	Zip Code 27707-4020	Transaction ID : VN7CZA354E5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tyree Bullock		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 607 Homeland Ave		Amount 22.80	
City Durham	State NC	Zip Code 27707-4020	Transaction ID : VN7CZA35573
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jeffery Burton		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1443 Matador Dr		Amount 47.06	
City Gotha	State FL	Zip Code 34734-4552	Transaction ID : VN7CZA34135
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jeffery Burton		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1443 Matador Dr		Amount 47.06	
City Gotha	State FL	Zip Code 34734-4552	Transaction ID : VN7CZA342P6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Philip Butler		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 7.13	
City Carrboro	State NC	Zip Code 27510-1837	Transaction ID : VN7CZA35140
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	101.25
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Philip Butler		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 7.13	
City Carrboro	State NC	Zip Code 27510-1837	Transaction ID : VN7CZA35201
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Philip Butler		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 7.13	
City Carrboro	State NC	Zip Code 27510-1837	Transaction ID : VN7CZA354H9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Philip Butler		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 7.13	
City Carrboro	State NC	Zip Code 27510-1837	Transaction ID : VN7CZA355A7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.39
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Samir Butt		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 737 Melon Ter Apt B		Amount 68.40	
City Philadelphia	State PA	Zip Code 19123-3428	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33YC8

Full Name (Last, First, Middle Initial) of Payee Samir Butt		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 737 Melon Ter Apt B		Amount 68.40	
City Philadelphia	State PA	Zip Code 19123-3428	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33ZE7

Full Name (Last, First, Middle Initial) of Payee Rashawn Byrd		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34SE3

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Rashawn Byrd		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34V39

Full Name (Last, First, Middle Initial) of Payee Rashawn Byrd		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34WR8

Full Name (Last, First, Middle Initial) of Payee Rashawn Byrd		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34YD5

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA34H04
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA34H11
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA34H37
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA34H45

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA34H61

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA34H79

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA34HR7
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA34HR3
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA34HS1
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA34HV7
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA34HW5
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA34HX3
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA34HZ8
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA34J06
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA34J22
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA34J30
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA34J48
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.33	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA355Q9
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	34.13
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA355S5
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA355T3
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA355V1
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.93
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA355X7
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA355Y5
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.44	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA35600
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.06
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 10.49	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA356A9
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 10.48	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA356B7
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 10.48	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA356C5
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.45
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 10.48	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA356E1
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 10.47	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA356F9
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 10.47	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA356G7
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.42
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 10.62	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA356H5
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.33	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA35820
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA35838
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.26
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA35846
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA35853
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA35861
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.93
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA35879
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.44	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA35887
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.33	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA358J6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA358K4
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA358M2
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA358N0
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.93
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA358P8
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA358Q6
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1818 NC-54		Amount 9.44	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA358R4
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.06
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34SC7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34V13
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34WP2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Carlino		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3729 E 53rd St		Amount 68.40	
City Cleveland	State OH	Zip Code 44105-1118	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Carlino		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3729 E 53rd St		Amount 68.40	
City Cleveland	State OH	Zip Code 44105-1118	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kelly Casey		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 701 Arlington St		Amount 47.06	
City Orlando	State FL	Zip Code 32805-1413	Transaction ID : VN7CZA341R9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kelly Casey		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 701 Arlington St		Amount 47.06	
City Orlando	State FL	Zip Code 32805-1413	Transaction ID : VN7CZA343B2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nolan Champer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 66 E Maynard Ave		Amount 72.96	
City Columbus	State OH	Zip Code 43202-2941	Transaction ID : VN7CZA34AM6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	167.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nolan Champer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 66 E Maynard Ave		Amount 72.96	
City Columbus	State OH	Zip Code 43202-2941	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Transaction ID : VN7CZA34BP5

Full Name (Last, First, Middle Initial) of Payee Charity Gladney		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5108 W 21st St Apt 3		Amount 59.35	
City Cicero	State IL	Zip Code 60804-2386	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		40940.56	

Transaction ID : VN7CZA345H3

Full Name (Last, First, Middle Initial) of Payee Charity Gladney		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5108 W 21st St Apt 3		Amount 59.35	
City Cicero	State IL	Zip Code 60804-2386	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		40940.56	

Transaction ID : VN7CZA345Y6

(a) SUBTOTAL of Itemized Independent Expenditures.....	191.66
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Molly Chase		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 109 Castle Bay Ct		Amount 7.13	
City Cary	State NC	Zip Code 27511-5087	Transaction ID : VN7CZA35166
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Molly Chase		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 109 Castle Bay Ct		Amount 7.13	
City Cary	State NC	Zip Code 27511-5087	Transaction ID : VN7CZA35235
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Molly Chase		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 109 Castle Bay Ct		Amount 7.13	
City Cary	State NC	Zip Code 27511-5087	Transaction ID : VN7CZA354K5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.39
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Molly Chase		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 109 Castle Bay Ct		Amount 7.13	
City Cary	State NC	Zip Code 27511-5087	Transaction ID : VN7CZA355C2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 89.21	
City Seattle	State WA	Zip Code 98109	Transaction ID : VN7CZA33YA2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 89.21	
City Seattle	State WA	Zip Code 98109	Transaction ID : VN7CZA33ZC1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	185.55
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 12.50	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA340V2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 12.50	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA340X8
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Reginald Cherubin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1126 Anchor St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1115	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA33Z06
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	93.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Reginald Cherubin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1126 Anchor St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1115	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Charles Childers		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 54 N Ogden Ave		Amount 94.11	
City Columbus	State OH	Zip Code 43204-3310	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Charles Childers		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 54 N Ogden Ave		Amount 94.11	
City Columbus	State OH	Zip Code 43204-3310	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	256.62
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 22.80	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA35108
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 22.80	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA351W0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 22.80	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA354D7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 22.80	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA35565
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 4.00	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA358Y1
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 4.50	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA35956
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.30
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 4.00	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA359T2
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 4.00	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA35A14
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Deborah Clark		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 5410 Vista View Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27612-8710	Transaction ID : VN7CZA34F59
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	30.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Deborah Clark		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5410 Vista View Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27612-8710	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA34FE1

Full Name (Last, First, Middle Initial) of Payee Deborah Clark		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5410 Vista View Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27612-8710	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA34GA2

Full Name (Last, First, Middle Initial) of Payee Deborah Clark		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5410 Vista View Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27612-8710	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA34GK3

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Corneilius Coachman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2120 Stryker St		Amount 34.20	
City Orlando	State FL	Zip Code 32805-1215	Transaction ID : VN7CZA341A9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Corneilius Coachman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2120 Stryker St		Amount 34.20	
City Orlando	State FL	Zip Code 32805-1215	Transaction ID : VN7CZA342X2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Portia Cochrum		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34S44
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Portia Cochrum		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34TS0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Portia Cochrum		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34WE9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Portia Cochrum		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34Y36
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Austin Collett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34T38
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Austin Collett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34VR5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Austin Collett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34XD2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.07
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Austin Collett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34Z21
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Malcolm Collins		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 336 Eddy Rd Apt 12		Amount 68.40	
City Cleveland	State OH	Zip Code 44108-1638	Transaction ID : VN7CZA34762
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Malcolm Collins		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 336 Eddy Rd Apt 12		Amount 68.40	
City Cleveland	State OH	Zip Code 44108-1638	Transaction ID : VN7CZA348H0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	147.49
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ryan Cook		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7029 Talbot Dr		Amount 10.69	
City Orlando	State FL	Zip Code 32819-7440	Transaction ID : VN7CZA342M1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ryan Cook		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7029 Talbot Dr		Amount 10.69	
City Orlando	State FL	Zip Code 32819-7440	Transaction ID : VN7CZA34440
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Terry Coplin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4802 SW 134th Loop		Amount 34.20	
City Ocala	State FL	Zip Code 34473-5270	Transaction ID : VN7CZA34286
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	55.58
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Terry Coplin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4802 SW 134th Loop		Amount 34.20	
City Ocala	State FL	Zip Code 34473-5270	Transaction ID : VN7CZA343R5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Isaac Cowan-Page		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2130 Vantine St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15221-1138	Transaction ID : VN7CZA34KF8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Isaac Cowan-Page		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2130 Vantine St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15221-1138	Transaction ID : VN7CZA34MJ2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Isaac Cowan-Page		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2130 Vantine St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15221-1138	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Isaac Cowan-Page		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2130 Vantine St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15221-1138	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brittany Cox		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.09
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Brittany Cox		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34VS3

Full Name (Last, First, Middle Initial) of Payee Brittany Cox		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34XE0

Full Name (Last, First, Middle Initial) of Payee Brittany Cox		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34Z38

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.07
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Samuel Craig		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 904 3rd St		Amount 45.60	
City Mc Kees Rocks	State PA	Zip Code 15136-3443	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34M18

Full Name (Last, First, Middle Initial) of Payee Samuel Craig		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 904 3rd St		Amount 22.80	
City Mc Kees Rocks	State PA	Zip Code 15136-3443	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34N44

Full Name (Last, First, Middle Initial) of Payee Samuel Craig		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 904 3rd St		Amount 22.80	
City Mc Kees Rocks	State PA	Zip Code 15136-3443	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34P71

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Samuel Craig		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 904 3rd St		Amount 45.60	
City Mc Kees Rocks	State PA	Zip Code 15136-3443	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34QA5

Full Name (Last, First, Middle Initial) of Payee Vivian Crawford		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34S02

Full Name (Last, First, Middle Initial) of Payee Vivian Crawford		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34TN9

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Vivian Crawford		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Vivian Crawford		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cruizers 16		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4706 Apex Highway		Amount 5.94	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.34
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Cruizers 16		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4706 Apex Highway		Amount 4.08	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA355F6
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cruizers 16		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4706 Apex Highway		Amount 6.68	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA35618
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cruizers 16		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4706 Apex Highway		Amount 4.59	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA35626
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	15.35
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Cruizers 16		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4706 Apex Highway		Amount 5.94	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA357P5
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cruizers 16		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4706 Apex Highway		Amount 4.08	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA357Q3
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cruizers 16		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4706 Apex Highway		Amount 5.94	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA35895
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	15.96
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Cruizers 16		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4706 Apex Highway		Amount 4.08	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA358A3
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cruizers 20		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1914 Sedwick Rd		Amount 3.92	
City Durham	State NC	Zip Code 27713-9423	Transaction ID : VN7CZA355G4
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cruizers 20		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1914 Sedwick Rd		Amount 4.41	
City Durham	State NC	Zip Code 27713-9423	Transaction ID : VN7CZA35634
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.41
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Cruizers 20		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1914 Sedwick Rd		Amount 3.92	
City Durham	State NC	Zip Code 27713-9423	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA357R1

Full Name (Last, First, Middle Initial) of Payee Cruizers 20		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1914 Sedwick Rd		Amount 3.92	
City Durham	State NC	Zip Code 27713-9423	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA358B1

Full Name (Last, First, Middle Initial) of Payee VierShaun Curry		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2224 Hamilton Ave.		Amount 68.40	
City Whitehall	State OH	Zip Code 43213	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34AY5

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.24
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee VierShaun Curry		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2224 Hamilton Ave.		Amount 68.40	
City Whitehall	State OH	Zip Code 43213	Transaction ID : VN7CZA34C04
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Full Name (Last, First, Middle Initial) of Payee Jude Daceus		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2562 Cinderlane Parkway		Amount 34.20	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA34Z78
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		5628.98	

Full Name (Last, First, Middle Initial) of Payee Jude Daceus		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2562 Cinderlane Parkway		Amount 34.20	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA343Q7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Theresa Daniel		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7209 S Orange Blossom Trl		Amount 34.20	
City Orlando	State FL	Zip Code 32809-5718	Transaction ID : VN7CZA341P4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		5628.98	

Full Name (Last, First, Middle Initial) of Payee Theresa Daniel		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7209 S Orange Blossom Trl		Amount 34.20	
City Orlando	State FL	Zip Code 32809-5718	Transaction ID : VN7CZA34396
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Darnella Sorrells		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6450 S King Dr		Amount 59.35	
City Chicago	State IL	Zip Code 60637-3172	Transaction ID : VN7CZA345G5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		40940.56	

(a) SUBTOTAL of Itemized Independent Expenditures.....	127.75
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Darnella Sorrells		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6450 S King Dr		Amount 59.35	
City Chicago	State IL	Zip Code 60637-3172	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA345X8

Full Name (Last, First, Middle Initial) of Payee Scott Davidson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 10588 Septney Ave NW		Amount 68.40	
City Uniontown	State OH	Zip Code 44685	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA346R1

Full Name (Last, First, Middle Initial) of Payee Scott Davidson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 10588 Septney Ave NW		Amount 68.40	
City Uniontown	State OH	Zip Code 44685	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34839

(a) SUBTOTAL of Itemized Independent Expenditures.....	196.15
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Laurel Davis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34S36
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Laurel Davis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34TR2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Laurel Davis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34WD1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Laurel Davis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34Y28
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cory Dawson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3878 W 36th St Down		Amount 68.40	
City Cleveland	State OH	Zip Code 44109-2716	Transaction ID : VN7CZA346F0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cory Dawson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3878 W 36th St Down		Amount 68.40	
City Cleveland	State OH	Zip Code 44109-2716	Transaction ID : VN7CZA347T8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Miranda Dean		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 40 Rowland Ave		Amount 94.11	
City Delaware	State OH	Zip Code 43015-2313	Transaction ID : VN7CZA349Z3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Miranda Dean		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 40 Rowland Ave		Amount 94.11	
City Delaware	State OH	Zip Code 43015-2313	Transaction ID : VN7CZA34B27
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Joseph Debow		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 471 Clearview Dr Apt 6		Amount 68.40	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA34720
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	256.62
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Joseph Debow		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 471 Clearview Dr Apt 6		Amount 68.40	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA348D8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ebony Deloach		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34SJ4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ebony Deloach		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34V71
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ebony Deloach		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34WW0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ebony Deloach		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34YH6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tabitha Diaz		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6101 Metrowest Blvd Apt 103		Amount 34.20	
City Orlando	State FL	Zip Code 32835-2954	Transaction ID : VN7CZA342F1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tabitha Diaz		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6101 Metrowest Blvd Apt 103		Amount 34.20	
City Orlando	State FL	Zip Code 32835-2954	Transaction ID : VN7CZA343Z0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34RN5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34TA2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	128.36
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34VZ0

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34XM7

Full Name (Last, First, Middle Initial) of Payee Anthony Dotson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34S77

(a) SUBTOTAL of Itemized Independent Expenditures.....	128.36
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Anthony Dotson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34TW4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Anthony Dotson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34WH3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Anthony Dotson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34Y69
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kellen Duckery		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6758 Chew Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-1918	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kellen Duckery		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6758 Chew Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-1918	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kevin Duncan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 105 S Watt St		Amount 68.40	
City Chillicothe	State OH	Zip Code 45601-3570	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kevin Duncan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 105 S Watt St		Amount 68.40	
City Chillicothe	State OH	Zip Code 45601-3570	Transaction ID : VN7CZA34B50
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Theresa Dunn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1377 Genessee Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43211-1434	Transaction ID : VN7CZA34AJ3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Theresa Dunn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1377 Genessee Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43211-1434	Transaction ID : VN7CZA34BM9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA350Q7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA351H3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA35446
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA354W6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Danielle Earl		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2006 E Main St		Amount 22.80	
City Durham	State NC	Zip Code 27703-3220	Transaction ID : VN7CZA350T1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Danielle Earl		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2006 E Main St		Amount 22.80	
City Durham	State NC	Zip Code 27703-3220	Transaction ID : VN7CZA351N4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Danielle Earl		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2006 E Main St		Amount 22.80	
City Durham	State NC	Zip Code 27703-3220	Transaction ID : VN7CZA35470
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Danielle Earl		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2006 E Main St		Amount 22.80	
City Durham	State NC	Zip Code 27703-3220	Transaction ID : VN7CZA35420
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kimberly Early		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1968	Transaction ID : VN7CZA34SY9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	92.68
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kimberly Early		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1968	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34VK6

Full Name (Last, First, Middle Initial) of Payee Kimberly Early		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1968	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34X84

Full Name (Last, First, Middle Initial) of Payee Kimberly Early		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1968	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34YX1

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.24
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Felicia Echols		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2824 N Judson St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-2016	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33YY0

Full Name (Last, First, Middle Initial) of Payee Felicia Echols		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2824 N Judson St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-2016	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34009

Full Name (Last, First, Middle Initial) of Payee Jeriamiyah Edwards		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 10 Curtin Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15210-1302	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34KQ1

(a) SUBTOTAL of Itemized Independent Expenditures.....	182.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jeriamiyah Edwards		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 10 Curtin Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15210-1302	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34MT5

Full Name (Last, First, Middle Initial) of Payee Jeriamiyah Edwards		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 10 Curtin Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15210-1302	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34NX2

Full Name (Last, First, Middle Initial) of Payee Jeriamiyah Edwards		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 10 Curtin Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15210-1302	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34Q08

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4714 Lee Ave		Amount 22.80	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA350G2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4714 Lee Ave		Amount 22.80	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA35199
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4714 Lee Ave		Amount 22.80	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA353W3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4714 Lee Ave		Amount 22.80	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA354N1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.00	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA358S1
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.50	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA35907
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.30
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.00	
City Saint Louis	State MO	Zip Code 63115-2108	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA359N3

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.00	
City Saint Louis	State MO	Zip Code 63115-2108	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA359W5

Full Name (Last, First, Middle Initial) of Payee Ruari Egan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 216 S Saint Clair St Apt 1		Amount 66.04	
City Pittsburgh	State PA	Zip Code 15206-3655	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34K67

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.04
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ruari Egan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 216 S Saint Clair St Apt 1		Amount 33.02	
City Pittsburgh	State PA	Zip Code 15206-3655	Transaction ID : VN7CZA34M91
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ruari Egan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 216 S Saint Clair St Apt 1		Amount 33.02	
City Pittsburgh	State PA	Zip Code 15206-3655	Transaction ID : VN7CZA34NC8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ruari Egan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 216 S Saint Clair St Apt 1		Amount 66.04	
City Pittsburgh	State PA	Zip Code 15206-3655	Transaction ID : VN7CZA34PF4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	132.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Angelina Ekis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 479 Summerwalk Cir		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27517-8685	Transaction ID : VN7CZA350J8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Angelina Ekis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 479 Summerwalk Cir		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27517-8685	Transaction ID : VN7CZA351C3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Angelina Ekis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 479 Summerwalk Cir		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27517-8685	Transaction ID : VN7CZA353Y9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Angelina Ekis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 479 Summerwalk Cir		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27517-8685	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA354Q6

Full Name (Last, First, Middle Initial) of Payee Abdallah El Hamawi		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 47.06	
City Orlando	State FL	Zip Code 32828-8216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34236

Full Name (Last, First, Middle Initial) of Payee Abdallah El Hamawi		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 47.06	
City Orlando	State FL	Zip Code 32828-8216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA343K5

(a) SUBTOTAL of Itemized Independent Expenditures.....	116.92
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Youssef El Hamawi		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 34.20	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA341F8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Youssef El Hamawi		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 34.20	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA34321
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jared Elick		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 1442 Bayshore Dr Apt 1D		Amount 68.40	
City Columbus	State OH	Zip Code 43204-3840	Transaction ID : VN7CZA34A19
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jared Elick		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1442 Bayshore Dr Apt 1D		Amount 68.40	
City Columbus	State OH	Zip Code 43204-3840	Transaction ID : VN7CZA34B42
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

Full Name (Last, First, Middle Initial) of Payee Kyle Euype		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1222 W Clifton Blvd		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1053	Transaction ID : VN7CZA347B1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Kyle Euype		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1222 W Clifton Blvd		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1053	Transaction ID : VN7CZA348P9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jashala Evans		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA350V9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jashala Evans		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA351P2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jashala Evans		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA35488
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jashala Evans		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA35515
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gray Ezra		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1814 Brisbane St		Amount 21.38	
City Silver Spring	State MD	Zip Code 20902-4018	Transaction ID : VN7CZA33Z48
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gray Ezra		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1814 Brisbane St		Amount 21.38	
City Silver Spring	State MD	Zip Code 20902-4018	Transaction ID : VN7CZA34066
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	65.56
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kollin Faessler		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5926 Mausser Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-2922	Transaction ID : VN7CZA341X9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kollin Faessler		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5926 Mausser Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-2922	Transaction ID : VN7CZA343E6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bridget Fawcett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5038 Gilbert Rd		Amount 76.38	
City Centerburg	State OH	Zip Code 43011-9495	Transaction ID : VN7CZA349X7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	144.78
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Bridget Fawcett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5038 Gilbert Rd		Amount 76.38	
City Centerburg	State OH	Zip Code 43011-9495	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ashley Feist		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2203 Sauer Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1436	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ashley Feist		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2203 Sauer Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1436	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	170.54
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ashley Feist		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2203 Sauer Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1436	Transaction ID : VN7CZA34VW7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ashley Feist		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2203 Sauer Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1436	Transaction ID : VN7CZA34XH3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jennifer Fidele		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4302 Meadowbrook Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32808-2136	Transaction ID : VN7CZA341B7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	128.36
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jennifer Fidele		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4302 Meadowbrook Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32808-2136	Transaction ID : VN7CZA342Y0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Finn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1518 Oakwood Dr		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15234-1012	Transaction ID : VN7CZA34KM7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Finn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1518 Oakwood Dr		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15234-1012	Transaction ID : VN7CZA34MQ2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee John Finn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1518 Oakwood Dr		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15234-1012	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34NT8
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		126851.89	

Full Name (Last, First, Middle Initial) of Payee John Finn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1518 Oakwood Dr		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15234-1012	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34PX5
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		126851.89	

Full Name (Last, First, Middle Initial) of Payee Fonadren Oliver		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2014 S Racine Ave		Amount 72.67	
City Chicago	State IL	Zip Code 60608-5346	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA345B6
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		40940.56	

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.07
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Fonadren Oliver		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2014 S Racine Ave		Amount 72.67	
City Chicago	State IL	Zip Code 60608-5346	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.17	
City Seattle	State WA	Zip Code 98105-1745	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.17	
City Seattle	State WA	Zip Code 98105-1745	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	81.01
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.17	
City Seattle	State WA	Zip Code 98105-1745	Transaction ID : VN7CZA37982
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.17	
City Seattle	State WA	Zip Code 98105-1745	Transaction ID : VN7CZA379B6
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Deanna Garrett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 47.08	
City Fort Thomas	State KY	Zip Code 41075-2520	Transaction ID : VN7CZA34RM7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	55.42
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Deanna Garrett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 47.08	
City Fort Thomas	State KY	Zip Code 41075-2520	Transaction ID : VN7CZA34T94
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Deanna Garrett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 47.08	
City Fort Thomas	State KY	Zip Code 41075-2520	Transaction ID : VN7CZA34VY3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Deanna Garrett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 47.08	
City Fort Thomas	State KY	Zip Code 41075-2520	Transaction ID : VN7CZA34XK9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.24
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34RQ1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34TC8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34W16
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 434889.86		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA34XP3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jennifer Geddis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1101 Willowedge Ct		Amount 22.80	
City Knightdale	State NC	Zip Code 27545-8673	Transaction ID : VN7CZA34FA9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jennifer Geddis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1101 Willowedge Ct		Amount 22.80	
City Knightdale	State NC	Zip Code 27545-8673	Transaction ID : VN7CZA34FK0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jennifer Geddis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1101 Willowedge Ct		Amount 22.80	
City Knightdale	State NC	Zip Code 27545-8673	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34GF1

Full Name (Last, First, Middle Initial) of Payee Jennifer Geddis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1101 Willowedge Ct		Amount 22.80	
City Knightdale	State NC	Zip Code 27545-8673	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34GR2

Full Name (Last, First, Middle Initial) of Payee Getenesh Yilma		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1208 Fairmont St NW Apt B		Amount 2.99	
City Washington	State DC	Zip Code 20009-5491	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA345E0

(a) SUBTOTAL of Itemized Independent Expenditures.....	48.59
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee GetGo #3172 Fox Chapel		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 1081 Freeport Rd		Amount 12.15	
City Pittsburgh	State PA	Zip Code 15238-3101	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA34QJ9
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee GetGo #3172 Fox Chapel		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 1081 Freeport Rd		Amount 6.08	
City Pittsburgh	State PA	Zip Code 15238-3101	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA34QT2
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee GetGo #3172 Fox Chapel		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 1081 Freeport Rd		Amount 6.08	
City Pittsburgh	State PA	Zip Code 15238-3101	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA34R25
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	24.31
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee GetGo #3172 Fox Chapel		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1081 Freeport Rd		Amount 13.19	
City Pittsburgh	State PA	Zip Code 15238-3101	Transaction ID : VN7CZA34RA8
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 134 W 107th St		Amount 22.80	
City Chicago	State IL	Zip Code 60628-3437	Transaction ID : VN7CZA350N1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 134 W 107th St		Amount 22.80	
City Chicago	State IL	Zip Code 60628-3437	Transaction ID : VN7CZA351F7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	58.79
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 134 W 107th St		Amount 22.80	
City Chicago	State IL	Zip Code 60628-3437	Transaction ID : VN7CZA35421
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 134 W 107th St		Amount 22.80	
City Chicago	State IL	Zip Code 60628-3437	Transaction ID : VN7CZA354T0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 134 W 107th St		Amount 4.00	
City Chicago	State IL	Zip Code 60628-3437	Transaction ID : VN7CZA358T9
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 134 W 107th St		Amount 4.50	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA35915
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		33651.35	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 134 W 107th St		Amount 4.00	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA359P1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		648181.85	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 134 W 107th St		Amount 4.00	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA359X3
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		648181.85	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Aqueelah Goins		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1647 Elsinore Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44112-3815	Transaction ID : VN7CZA346V5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Aqueelah Goins		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1647 Elsinore Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44112-3815	Transaction ID : VN7CZA34863
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Steven Gomera		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12127 Green Badger Ln		Amount 34.20	
City Orlando	State FL	Zip Code 32817-3564	Transaction ID : VN7CZA342B9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Steven Gomera		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12127 Green Badger Ln		Amount 34.20	
City Orlando	State FL	Zip Code 32817-3564	Transaction ID : VN7CZA343V9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Racheal Green		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 527 N Negley Ave Apt 3		Amount 64.39	
City Pittsburgh	State PA	Zip Code 15206-2445	Transaction ID : VN7CZA34KA8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Racheal Green		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 527 N Negley Ave Apt 3		Amount 32.20	
City Pittsburgh	State PA	Zip Code 15206-2445	Transaction ID : VN7CZA34MD3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	130.79
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Racheal Green		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 527 N Negley Ave Apt 3		Amount 32.20	
City Pittsburgh	State PA	Zip Code 15206-2445	Transaction ID : VN7CZA34NG9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee Racheal Green		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 527 N Negley Ave Apt 3		Amount 64.39	
City Pittsburgh	State PA	Zip Code 15206-2445	Transaction ID : VN7CZA34PK6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee Rose Greene		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 417 Moline St		Amount 22.80	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA350K6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	119.39
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Rose Greene		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 417 Moline St		Amount 22.80	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA351D1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Rose Greene		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 417 Moline St		Amount 22.80	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA353Z7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Rose Greene		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 417 Moline St		Amount 22.80	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA354R4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee William Greene		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 36 E Montana St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-2210	Transaction ID : VN7CZA33Y94
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Greene		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 36 E Montana St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-2210	Transaction ID : VN7CZA33ZB3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Griffith		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5389 Shannon Ln		Amount 68.40	
City Columbus	State OH	Zip Code 43235-7294	Transaction ID : VN7CZA34AD4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee John Griffith		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5389 Shannon Ln		Amount 68.40	
City Columbus	State OH	Zip Code 43235-7294	Transaction ID : VN7CZA34BG7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA350R5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA351J1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA35454
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA354X4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nicholas Grubbs		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34RR9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nicholas Grubbs		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34TD5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nicholas Grubbs		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34W24
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nicholas Grubbs		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34XQ1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ian Haffling		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 917 McCandless Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15201-2451	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34KV2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ian Haffling		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 917 McCandless Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15201-2451	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34MY7
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ian Haffling		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 917 McCandless Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15201-2451	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34P13
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ian Haffling		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 917 McCandless Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15201-2451	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34Q48	

Full Name (Last, First, Middle Initial) of Payee Allen Hafford		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34RX8	

Full Name (Last, First, Middle Initial) of Payee Allen Hafford		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34TJ5	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Allen Hafford		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34W74
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Allen Hafford		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34XW0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Conrad Hampton		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3461 Shadeland Ave		Amount 66.04	
City Pittsburgh	State PA	Zip Code 15212-2253	Transaction ID : VN7CZA34M59
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	134.44
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Conrad Hampton		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3461 Shadeland Ave		Amount 33.02	
City Pittsburgh	State PA	Zip Code 15212-2253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34N86
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Conrad Hampton		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3461 Shadeland Ave		Amount 33.02	
City Pittsburgh	State PA	Zip Code 15212-2253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34PB2
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Conrad Hampton		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3461 Shadeland Ave		Amount 66.04	
City Pittsburgh	State PA	Zip Code 15212-2253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34QE7
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	132.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Margaret Hane		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 66.04	
City Pittsburgh	State PA	Zip Code 15224-1953	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34M67

Full Name (Last, First, Middle Initial) of Payee Margaret Hane		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 33.02	
City Pittsburgh	State PA	Zip Code 15224-1953	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34N94

Full Name (Last, First, Middle Initial) of Payee Margaret Hane		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 33.02	
City Pittsburgh	State PA	Zip Code 15224-1953	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34PC0

(a) SUBTOTAL of Itemized Independent Expenditures.....	132.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Margaret Hane		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 66.04	
City Pittsburgh	State PA	Zip Code 15224-1953	Transaction ID : VN7CZA34QF5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee Carolyn Happer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2815 Briar Park Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32833-5521	Transaction ID : VN7CZA341M8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		5628.98	

Full Name (Last, First, Middle Initial) of Payee Carolyn Happer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2815 Briar Park Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32833-5521	Transaction ID : VN7CZA34371
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	134.44
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Connor Harney		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 8207 Creek Glen Way		Amount 7.13	
City Apex	State NC	Zip Code 27502-4218	Transaction ID : VN7CZA35158
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Connor Harney		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 8207 Creek Glen Way		Amount 7.13	
City Apex	State NC	Zip Code 27502-4218	Transaction ID : VN7CZA35219
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Connor Harney		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 8207 Creek Glen Way		Amount 7.13	
City Apex	State NC	Zip Code 27502-4218	Transaction ID : VN7CZA354J7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	21.39
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Connor Harney		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 8207 Creek Glen Way		Amount 7.13	
City Apex	State NC	Zip Code 27502-4218	Transaction ID : VN7CZA355B4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Beenah Harrell		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34SN8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Beenah Harrell		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34VA5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	75.53
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Beenah Harrell		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA34WZ3
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		434889.86	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Beenah Harrell		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA34YM0
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		434889.86	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Tyler Harris		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2437 Robertson Ave		Amount 38.76	
City Cincinnati	State OH	Zip Code 45212-3410	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA34T05
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		648181.85	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	107.16
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tyler Harris		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2437 Robertson Ave		Amount 38.76	
City Cincinnati	State OH	Zip Code 45212-3410	Transaction ID : VN7CZA34VN1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tyler Harris		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2437 Robertson Ave		Amount 38.76	
City Cincinnati	State OH	Zip Code 45212-3410	Transaction ID : VN7CZA34XA0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tyler Harris		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2437 Robertson Ave		Amount 38.76	
City Cincinnati	State OH	Zip Code 45212-3410	Transaction ID : VN7CZA34YZ7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	116.28
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shenae Harrison		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7515 Roslyn St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15218-2518	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34K74
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Shenae Harrison		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7515 Roslyn St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15218-2518	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34MA9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Shenae Harrison		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7515 Roslyn St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15218-2518	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34ND5
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shenae Harrison		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7515 Roslyn St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15218-2518	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34PG2

Full Name (Last, First, Middle Initial) of Payee Michael Harry		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 336 E Elma Ave		Amount 89.16	
City Laurel Springs	State NJ	Zip Code 08021-2110	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA33YG0

Full Name (Last, First, Middle Initial) of Payee Michael Harry		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 336 E Elma Ave		Amount 89.16	
City Laurel Springs	State NJ	Zip Code 08021-2110	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA33ZJ8

(a) SUBTOTAL of Itemized Independent Expenditures.....	223.92
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA37780
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA37797
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA377A5
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.27
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA377H1
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA377J9
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA377K6
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.27
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA378C1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA378D9
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA378E7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.27
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA378N2
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA378P0
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA378Q8
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.27
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee John Healy		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34S69
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Healy		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34TV6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Healy		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34WG5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee John Healy		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34Y51
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sharlene Hicks		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 720 S Eureka Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43204-2914	Transaction ID : VN7CZA34A68
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sharlene Hicks		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 720 S Eureka Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43204-2914	Transaction ID : VN7CZA34B92
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Leslie Hoffman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 601 N Beatty St Apt ZR		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15206-2483	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34KP3

Full Name (Last, First, Middle Initial) of Payee Leslie Hoffman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 601 N Beatty St Apt ZR		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15206-2483	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34MS7

Full Name (Last, First, Middle Initial) of Payee Leslie Hoffman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 601 N Beatty St Apt ZR		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15206-2483	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34NW4

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Leslie Hoffman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 601 N Beatty St Apt ZR		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15206-2483	Transaction ID : VN7CZA34PZ0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee Homewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5893 American Way		Amount 41.49	
City Orlando	State FL	Zip Code 32819-8201	Transaction ID : VN7CZA344P0
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		5628.98	

Full Name (Last, First, Middle Initial) of Payee Homewood Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5893 American Way		Amount 38.30	
City Orlando	State FL	Zip Code 32819-8201	Transaction ID : VN7CZA34574
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	125.39
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jeremy Horne		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5116 Hawaiian Ter Apt 2		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1166	Transaction ID : VN7CZA34SH6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jeremy Horne		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5116 Hawaiian Ter Apt 2		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1166	Transaction ID : VN7CZA34V63
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jeremy Horne		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5116 Hawaiian Ter Apt 2		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1166	Transaction ID : VN7CZA34WV2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jeremy Horne		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5116 Hawaiian Ter Apt 2		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1166	Transaction ID : VN7CZA34YG8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathan Hubbell-Staeble		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2010 Corning Ave		Amount 79.34	
City Cleveland	State OH	Zip Code 44109-1721	Transaction ID : VN7CZA346A1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathan Hubbell-Staeble		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2010 Corning Ave		Amount 79.34	
City Cleveland	State OH	Zip Code 44109-1721	Transaction ID : VN7CZA347N8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	192.88
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Justin Hullum		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1859 W 58th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44102-3252	Transaction ID : VN7CZA346J4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Justin Hullum		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1859 W 58th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44102-3252	Transaction ID : VN7CZA347X2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Steven Hunter		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34SW3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Steven Hunter		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34VH0

Full Name (Last, First, Middle Initial) of Payee Steven Hunter		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34X69

Full Name (Last, First, Middle Initial) of Payee Steven Hunter		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34YV5

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34SS9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34VE6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34X35
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34YR2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ikea Johnson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6737 S Bell Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60636-2524	Transaction ID : VN7CZA345K9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ikea Johnson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6737 S Bell Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60636-2524	Transaction ID : VN7CZA34602
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	152.90
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Donald Jackson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 266 Albion Pl		Amount 34.20	
City Cincinnati	State OH	Zip Code 45219-2902	Transaction ID : VN7CZA34SF0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Donald Jackson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 266 Albion Pl		Amount 34.20	
City Cincinnati	State OH	Zip Code 45219-2902	Transaction ID : VN7CZA34V47
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Donald Jackson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 266 Albion Pl		Amount 34.20	
City Cincinnati	State OH	Zip Code 45219-2902	Transaction ID : VN7CZA34WS6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Donald Jackson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 266 Albion Pl		Amount 34.20	
City Cincinnati	State OH	Zip Code 45219-2902	Transaction ID : VN7CZA34YE3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Roseanna Jackson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3118 Pell Mell Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32818-2800	Transaction ID : VN7CZA341C5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Roseanna Jackson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3118 Pell Mell Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32818-2800	Transaction ID : VN7CZA342Z7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kymberly Jacobs		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 280 W Johnstown Rd Apt D		Amount 94.11	
City Gahanna	State OH	Zip Code 43230-2762	Transaction ID : VN7CZA34A01
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Kymberly Jacobs		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 280 W Johnstown Rd Apt D		Amount 94.11	
City Gahanna	State OH	Zip Code 43230-2762	Transaction ID : VN7CZA34B34
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

Full Name (Last, First, Middle Initial) of Payee Annette James		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 32 E Lawson St Apt F		Amount 22.80	
City Durham	State NC	Zip Code 27701-4679	Transaction ID : VN7CZA350Y3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	211.02
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Annette James		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 32 E Lawson St Apt F		Amount 22.80	
City Durham	State NC	Zip Code 27701-4679	Transaction ID : VN7CZA351T4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Annette James		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 32 E Lawson St Apt F		Amount 22.80	
City Durham	State NC	Zip Code 27701-4679	Transaction ID : VN7CZA354B2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Annette James		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 32 E Lawson St Apt F		Amount 22.80	
City Durham	State NC	Zip Code 27701-4679	Transaction ID : VN7CZA35549
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jack Jean-Baptiste		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32817-4139	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA342A2	

Full Name (Last, First, Middle Initial) of Payee Jack Jean-Baptiste		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32817-4139	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA343T1	

Full Name (Last, First, Middle Initial) of Payee Jessie Jean-Baptiste		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 47.06	
City Orlando	State FL	Zip Code 32817-4139	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA341G6	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.46
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jessie Jean-Baptiste		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 47.06	
City Orlando	State FL	Zip Code 32817-4139	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34339

Full Name (Last, First, Middle Initial) of Payee Kaisey Jefferson		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 4242 Honey Bee Ct		Amount 68.40	
City Grove City	State OH	Zip Code 43123-8497	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34AG7

Full Name (Last, First, Middle Initial) of Payee Kaisey Jefferson		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 4242 Honey Bee Ct		Amount 68.40	
City Grove City	State OH	Zip Code 43123-8497	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34BJ3

(a) SUBTOTAL of Itemized Independent Expenditures.....	183.86
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Deedra Jenrett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2984 Maryland Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43209-1550	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34AT3

Full Name (Last, First, Middle Initial) of Payee Deedra Jenrett		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2984 Maryland Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43209-1550	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34BX0

Full Name (Last, First, Middle Initial) of Payee Johnathan Jones		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 11314 S Forest Ave		Amount 17.46	
City Chicago	State IL	Zip Code 60628-5023	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA345A8

(a) SUBTOTAL of Itemized Independent Expenditures.....	154.26
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Johnathan Jones		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 11314 S Forest Ave		Amount 17.46	
City Chicago	State IL	Zip Code 60628-5023	Transaction ID : VN7CZA345R9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Altrese Johnson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 54 Wilbe Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32805-1749	Transaction ID : VN7CZA341T5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Altrese Johnson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 54 Wilbe Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32805-1749	Transaction ID : VN7CZA343C0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	85.86
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Donald Johnson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2424 N 4th St		Amount 94.11	
City Columbus	State OH	Zip Code 43202-2707	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA349Y5

Full Name (Last, First, Middle Initial) of Payee Donald Johnson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2424 N 4th St		Amount 94.11	
City Columbus	State OH	Zip Code 43202-2707	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34B19

Full Name (Last, First, Middle Initial) of Payee Paris Johnson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address PO Box 201504		Amount 68.40	
City Shaker Hts	State OH	Zip Code 44120-8108	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA346N8

(a) SUBTOTAL of Itemized Independent Expenditures.....	256.62
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Paris Johnson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address PO Box 201504		Amount 68.40	
City Shaker Hts	State OH	Zip Code 44120-8108	Transaction ID : VN7CZA34805
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA375T6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA37611
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA376P7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA376X3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee William Jordan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 722 Atwood Rd		Amount 68.40	
City Philadelphia	State PA	Zip Code 19151-3702	Transaction ID : VN7CZA33YN9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee William Jordan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 722 Atwood Rd		Amount 68.40	
City Philadelphia	State PA	Zip Code 19151-3702	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		126851.89	

Full Name (Last, First, Middle Initial) of Payee Dominique Jordan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1754 Lee Rd		Amount 79.30	
City Cleveland	State OH	Zip Code 44118-1736	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Dominique Jordan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1754 Lee Rd		Amount 79.30	
City Cleveland	State OH	Zip Code 44118-1736	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

(a) SUBTOTAL of Itemized Independent Expenditures.....	227.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Brendan Joyce		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1897 W 74th St Apt 6		Amount 79.30	
City Cleveland	State OH	Zip Code 44102-2982	Transaction ID : VN7CZA346C7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brendan Joyce		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1897 W 74th St Apt 6		Amount 79.30	
City Cleveland	State OH	Zip Code 44102-2982	Transaction ID : VN7CZA347Q4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Velissa Joyner		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA375Y8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	181.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Velissa Joyner		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA37653
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Velissa Joyner		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA376T9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Velissa Joyner		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA37714
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee JVA Campaigns		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 240 N 5th St Ste 360		Amount 6024.50	
City Columbus	State OH	Zip Code 43215-2600	Transaction ID : VN7CZA349V1
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee JVA Campaigns		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 240 N 5th St Ste 360		Amount 6024.50	
City Columbus	State OH	Zip Code 43215-2600	Transaction ID : VN7CZA349W9
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee JVA Campaigns		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 240 N 5th St Ste 360		Amount 6024.50	
City Columbus	State OH	Zip Code 43215-2600	Transaction ID : VN7CZA34CJ6
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	18073.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee JVA Campaigns		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 240 N 5th St Ste 360		Amount 6024.50	
City Columbus	State OH	Zip Code 43215-2600	
Purpose of Expenditure Printing		Category/ Type	Transaction ID : VN7CZA34CK4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee JVA Campaigns		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 240 N 5th St Ste 360		Amount 6024.50	
City Columbus	State OH	Zip Code 43215-2600	
Purpose of Expenditure Printing		Category/ Type	Transaction ID : VN7CZA350D0
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 434889.86		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee JVA Campaigns		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 240 N 5th St Ste 360		Amount 6024.50	
City Columbus	State OH	Zip Code 43215-2600	
Purpose of Expenditure Printing		Category/ Type	Transaction ID : VN7CZA350E8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	18073.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Robert Keegan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1989 W 58th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44102-3263	Transaction ID : VN7CZA34738
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Robert Keegan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1989 W 58th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44102-3263	Transaction ID : VN7CZA348E6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lydia Kelly		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 18915 Detroit Ext Apt 601		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-3242	Transaction ID : VN7CZA346Y9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Lydia Kelly		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 18915 Detroit Ext Apt 601		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-3242	Transaction ID : VN7CZA34896
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Taylor Kern		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA348K9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Taylor Kern		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA34T86
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Taylor Kern		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA34VX5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Taylor Kern		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA34XJ1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Adriane Kessler		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2205 Hedgerow Rd Unit H		Amount 21.38	
City Columbus	State OH	Zip Code 43220-6325	Transaction ID : VN7CZA34AZ3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	89.78
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Adriane Kessler		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2205 Hedgerow Rd Unit H		Amount 21.38	
City Columbus	State OH	Zip Code 43220-6325	Transaction ID : VN7CZA34C11
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA350M4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA351E9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	66.98
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA35413
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA354S2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.00	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA358V7
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.50	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA35923
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		33651.35	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.00	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA359Q8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		648181.85	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.00	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA359Y1
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		648181.85	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27609-7767	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA34F83

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27609-7767	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA34FH4

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27609-7767	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA34GD5

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27609-7767	Transaction ID : VN7CZA34GP7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brittany Knott		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34S10
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brittany Knott		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34TP7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Brittany Knott		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brittany Knott		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lakendrea Pike		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 8421 S Kimbark Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60619-6442	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	127.75
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Lakendrea Pike		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 8421 S Kimbark Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60619-6442	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34610	

Full Name (Last, First, Middle Initial) of Payee Nery Lam		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3845 Goose Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32822-7715	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA341Q1	

Full Name (Last, First, Middle Initial) of Payee Nery Lam		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3845 Goose Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32822-7715	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA343A4	

(a) SUBTOTAL of Itemized Independent Expenditures.....	127.75
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Manuel Lampon		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2313 N Park Ave Apt 1		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA33Y79
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Manuel Lampon		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2313 N Park Ave Apt 1		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA33Z97
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Lindsey Lanier		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 130 E Longview St		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27516-1706	Transaction ID : VN7CZA35132
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	159.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Lindsey Lanier		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 130 E Longview St		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27516-1706	Transaction ID : VN7CZA351Z3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lindsey Lanier		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 130 E Longview St		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27516-1706	Transaction ID : VN7CZA354G1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lindsey Lanier		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 130 E Longview St		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27516-1706	Transaction ID : VN7CZA35599
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Lauriano Rivera		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6725 N Sheridan Rd		Amount 59.35	
City Chicago	State IL	Zip Code 60626-4508	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA345P3
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought		40940.56	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Lauriano Rivera		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6725 N Sheridan Rd		Amount 59.35	
City Chicago	State IL	Zip Code 60626-4508	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA34635
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought		40940.56	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Wilburt Laurore		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5228 Cinderlane Pkwy		Amount 34.20	
City Orlando	State FL	Zip Code 32808-1024	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA34260
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought		5628.98	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	152.90
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Wilburt Laurore		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5228 Cinderlane Pkwy		Amount 34.20	
City Orlando	State FL	Zip Code 32808-1024	Transaction ID : VN7CZA343P9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Eric Law		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 180 Belvidere Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43223-1157	Transaction ID : VN7CZA34A84
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Eric Law		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 180 Belvidere Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43223-1157	Transaction ID : VN7CZA34BB8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee David Lebel		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5972 Paint Creek Way		Amount 68.40	
City Hilliard	State OH	Zip Code 43026-7735	Transaction ID : VN7CZA34A35
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee David Lebel		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5972 Paint Creek Way		Amount 68.40	
City Hilliard	State OH	Zip Code 43026-7735	Transaction ID : VN7CZA34B68
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee LEE ST. Family Fare		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3220 E Gate City Blvd		Amount 1.67	
City Greensboro	State NC	Zip Code 27406-9401	Transaction ID : VN7CZA377C1
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	138.47
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee LEE ST. Family Fare		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3220 E Gate City Blvd		Amount 1.67	
City Greensboro	State NC	Zip Code 27406-9401	Transaction ID : VN7CZA377N2
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee LEE ST. Family Fare		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3220 E Gate City Blvd		Amount 1.67	
City Greensboro	State NC	Zip Code 27406-9401	Transaction ID : VN7CZA378G3
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee LEE ST. Family Fare		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3220 E Gate City Blvd		Amount 1.67	
City Greensboro	State NC	Zip Code 27406-9401	Transaction ID : VN7CZA378S4
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	5.01
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Eun Lee		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1107 Wineberry Ct		Amount 34.20	
City Ocoee	State FL	Zip Code 34761-3417	Transaction ID : VN7CZA342E3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eun Lee		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1107 Wineberry Ct		Amount 34.20	
City Ocoee	State FL	Zip Code 34761-3417	Transaction ID : VN7CZA343Y2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Andres Lewis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 123 Sherbrook Blvd		Amount 68.40	
City Upper Darby	State PA	Zip Code 19082-4604	Transaction ID : VN7CZA33YX2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Andres Lewis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 123 Sherbrook Blvd		Amount 68.40	
City Upper Darby	State PA	Zip Code 19082-4604	Transaction ID : VN7CZA33ZZ1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Damir Lewis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1979 Plymouth St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2721	Transaction ID : VN7CZA33YR3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Damir Lewis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1979 Plymouth St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2721	Transaction ID : VN7CZA33ZT2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Johnny Lewis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1202 Marlowe Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-2628	Transaction ID : VN7CZA34677
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Johnny Lewis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1202 Marlowe Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-2628	Transaction ID : VN7CZA347J5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joshua Lewis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 79.25	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA34693
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	216.05
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Joshua Lewis		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 79.25	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA347M1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Todd Littlejohn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 306 Lea St Apt 3		Amount 45.60	
City Munhall	State PA	Zip Code 15120-2797	Transaction ID : VN7CZA34M42
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Todd Littlejohn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 306 Lea St Apt 3		Amount 22.80	
City Munhall	State PA	Zip Code 15120-2797	Transaction ID : VN7CZA34N78
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	147.65
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Todd Littlejohn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 306 Lea St Apt 3		Amount 22.80	
City Munhall	State PA	Zip Code 15120-2797	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34PA5

Full Name (Last, First, Middle Initial) of Payee Todd Littlejohn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 306 Lea St Apt 3		Amount 45.60	
City Munhall	State PA	Zip Code 15120-2797	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34QD9

Full Name (Last, First, Middle Initial) of Payee Amir Longhorne		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA375X0

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Amir Longhorne		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA37645
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Amir Longhorne		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA376S1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Amir Longhorne		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA37706
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Brandon Lugo		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2066 Nedra Ave		Amount 34.20	
City Deltona	State FL	Zip Code 32725-3363	Transaction ID : VN7CZA342H7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brandon Lugo		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2066 Nedra Ave		Amount 34.20	
City Deltona	State FL	Zip Code 32725-3363	Transaction ID : VN7CZA34416
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 22.80	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA350Z0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 22.80	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA351V2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 22.80	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA354C0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 22.80	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA35557
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 4.00	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA358Z9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 4.50	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA35964
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 4.00	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA359V0
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 4.00	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA35A22
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 22.80	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA34FB7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 22.80	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA34FM8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 22.80	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA34GG9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 22.80	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA34GS0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 4.17	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA34J97
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.77
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 4.17	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA34JE7
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 4.17	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA34JX5
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 4.17	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA34K25
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tanda Makupson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1428 Golden Gate Blvd		Amount 68.40	
City Mayfield Hts	State OH	Zip Code 44124-6832	Transaction ID : VN7CZA346T7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tanda Makupson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1428 Golden Gate Blvd		Amount 68.40	
City Mayfield Hts	State OH	Zip Code 44124-6832	Transaction ID : VN7CZA34855
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Daniel Marasco		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5233 Stanton Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15201-2592	Transaction ID : VN7CZA34KT5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	182.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Daniel Marasco		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5233 Stanton Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15201-2592	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34MX9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Daniel Marasco		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5233 Stanton Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15201-2592	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34P06
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Daniel Marasco		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5233 Stanton Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15201-2592	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34Q32
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tyreek Marsh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 127 E Kennedy Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15214-2731	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34M00

Full Name (Last, First, Middle Initial) of Payee Tyreek Marsh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 127 E Kennedy Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15214-2731	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34N36

Full Name (Last, First, Middle Initial) of Payee Tyreek Marsh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 127 E Kennedy Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15214-2731	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34P63

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tyreek Marsh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 127 E Kennedy Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15214-2731	Transaction ID : VN7CZA34Q97
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marnetta McCain		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 252 E 244th St Apt 206		Amount 68.40	
City Euclid	State OH	Zip Code 44123-1463	Transaction ID : VN7CZA346W3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marnetta McCain		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 252 E 244th St Apt 206		Amount 68.40	
City Euclid	State OH	Zip Code 44123-1463	Transaction ID : VN7CZA34871
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	182.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Razzah McDade		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4532 Commander Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-3666	Transaction ID : VN7CZA341J2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Razzah McDade		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4532 Commander Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-3666	Transaction ID : VN7CZA34355
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jason McDaniel		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 658 SE 148th Ave		Amount 12.50	
City Portland	State OR	Zip Code 97233-2588	Transaction ID : VN7CZA340W0
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	80.90
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jason McDaniel		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 658 SE 148th Ave		Amount 12.50	
City Portland	State OR	Zip Code 97233-2588	Transaction ID : VN7CZA340Y6
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Richard McDonald		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1365 Marlboro Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15221-2677	Transaction ID : VN7CZA34KB6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Richard McDonald		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1365 Marlboro Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15221-2677	Transaction ID : VN7CZA34ME1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	80.90
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Richard McDonald		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1365 Marlboro Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15221-2677	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34NH7

Full Name (Last, First, Middle Initial) of Payee Richard McDonald		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1365 Marlboro Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15221-2677	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34PM4

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA375W2

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA37637
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA376R3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA376Z8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Linsey McGlocklin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12530 Lake Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1574	Transaction ID : VN7CZA34796
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Linsey McGlocklin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12530 Lake Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1574	Transaction ID : VN7CZA348M3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Howard McMillan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5907 Lawndale St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1209	Transaction ID : VN7CZA33YT9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Howard McMillan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5907 Lawndale St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1209	Transaction ID : VN7CZA33ZW7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dominique McQueary		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1621 Harvard Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43203-1249	Transaction ID : VN7CZA34AK1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dominique McQueary		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1621 Harvard Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43203-1249	Transaction ID : VN7CZA34BN7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Day Metvier		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 10949 Oberlin Rd		Amount 102.60	
City Oberlin	State OH	Zip Code 44074-9771	Transaction ID : VN7CZA34712
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Day Metvier		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 10949 Oberlin Rd		Amount 102.60	
City Oberlin	State OH	Zip Code 44074-9771	Transaction ID : VN7CZA348C0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Diana Metobob		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2335 N Carlisle St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4515	Transaction ID : VN7CZA33Y87
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	273.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Diana Metobob		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2335 N Carlisle St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4515	Transaction ID : VN7CZA33ZA5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee Jazzmine Miles		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34T54
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Jazzmine Miles		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34VT1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	89.78
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jazzmine Miles		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Full Name (Last, First, Middle Initial) of Payee Jazzmine Miles		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Full Name (Last, First, Middle Initial) of Payee Sonny Mobley		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	55.58
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sonny Mobley		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34V06
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sonny Mobley		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34WN4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sonny Mobley		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34YA1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kayci Moodie		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1920 73rd Ave		Amount 89.16	
City Philadelphia	State PA	Zip Code 19138-2711	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA33Y61

Full Name (Last, First, Middle Initial) of Payee Kayci Moodie		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1920 73rd Ave		Amount 89.16	
City Philadelphia	State PA	Zip Code 19138-2711	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA33Z89

Full Name (Last, First, Middle Initial) of Payee Sandra Moore		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2623 Oakdale Ave		Amount 68.40	
City Lorain	State OH	Zip Code 44055-1061	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA346Q3

(a) SUBTOTAL of Itemized Independent Expenditures.....	246.72
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sandra Moore		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2623 Oakdale Ave		Amount 68.40	
City Lorain	State OH	Zip Code 44055-1061	Transaction ID : VN7CZA34821
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Deja Moore Goodwin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45238-3434	Transaction ID : VN7CZA34RP3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Deja Moore Goodwin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45238-3434	Transaction ID : VN7CZA34TB0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Deja Moore Goodwin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45238-3434	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34W08	

Full Name (Last, First, Middle Initial) of Payee Deja Moore Goodwin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45238-3434	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34XN5	

Full Name (Last, First, Middle Initial) of Payee Daniel Moraff		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 305 Maple Ln		Amount 45.60	
City Sewickley	State PA	Zip Code 15143-1054	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34KS7	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Daniel Moraff		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 305 Maple Ln		Amount 22.80	
City Sewickley	State PA	Zip Code 15143-1054	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Daniel Moraff		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 305 Maple Ln		Amount 22.80	
City Sewickley	State PA	Zip Code 15143-1054	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Daniel Moraff		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 305 Maple Ln		Amount 45.60	
City Sewickley	State PA	Zip Code 15143-1054	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Stacey Morgan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34SP6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Stacey Morgan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34VB2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Stacey Morgan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34X01
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Stacey Morgan		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34YN8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marvin Morris		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34T13
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marvin Morris		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34VP9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Marvin Morris		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34XB8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marvin Morris		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34Z05
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	Transaction ID : VN7CZA378T2
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.57
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA378X5
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA37966
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA37990
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Malik Muhammad		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 560 W 7th Ave		Amount 45.60	
City West Homestead	State PA	Zip Code 15120-1053	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34M75

Full Name (Last, First, Middle Initial) of Payee Malik Muhammad		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 560 W 7th Ave		Amount 22.80	
City West Homestead	State PA	Zip Code 15120-1053	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34NA2

Full Name (Last, First, Middle Initial) of Payee Malik Muhammad		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 560 W 7th Ave		Amount 22.80	
City West Homestead	State PA	Zip Code 15120-1053	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34PD8

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Malik Muhammad		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 560 W 7th Ave		Amount 45.60	
City West Homestead	State PA	Zip Code 15120-1053	Transaction ID : VN7CZA34QG3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee James Murray		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 64.39	
City Pittsburgh	State PA	Zip Code 15238-1420	Transaction ID : VN7CZA34KR9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee James Murray		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 32.20	
City Pittsburgh	State PA	Zip Code 15238-1420	Transaction ID : VN7CZA34MV3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	142.19
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee James Murray		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 32.20	
City Pittsburgh	State PA	Zip Code 15238-1420	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34NY0

Full Name (Last, First, Middle Initial) of Payee James Murray		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 64.39	
City Pittsburgh	State PA	Zip Code 15238-1420	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34Q16

Full Name (Last, First, Middle Initial) of Payee Damien Navarro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 31 E Armat St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-2201	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA33YW5

(a) SUBTOTAL of Itemized Independent Expenditures.....	164.99
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Damien Navarro		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 31 E Armat St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-2201	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		126851.89	

Transaction ID : VN7CZA33ZY3

Full Name (Last, First, Middle Initial) of Payee Youssouf Ndiaye		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA34SD5

Full Name (Last, First, Middle Initial) of Payee Youssouf Ndiaye		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA34V21

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Youssouf Ndiaye		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34WQ0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Youssouf Ndiaye		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34YC7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Letecia Nevels		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3024 Wadlow St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15212-2402	Transaction ID : VN7CZA34KW0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Letecia Nevels		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3024 Wadlow St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15212-2402	Transaction ID : VN7CZA34MZ5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Letecia Nevels		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3024 Wadlow St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15212-2402	Transaction ID : VN7CZA34P21
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Letecia Nevels		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3024 Wadlow St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15212-2402	Transaction ID : VN7CZA34Q56
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Darius Nixon		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3100 Lemay Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27604-1626	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA34F67

Full Name (Last, First, Middle Initial) of Payee Darius Nixon		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3100 Lemay Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27604-1626	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA34FF8

Full Name (Last, First, Middle Initial) of Payee Darius Nixon		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3100 Lemay Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27604-1626	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA34GB0

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Darius Nixon		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3100 Lemay Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27604-1626	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34GM1

Full Name (Last, First, Middle Initial) of Payee Steven Nourse		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4708 Cadmus Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43228-8404	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34A50

Full Name (Last, First, Middle Initial) of Payee Steven Nourse		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4708 Cadmus Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43228-8404	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34B84

(a) SUBTOTAL of Itemized Independent Expenditures.....	159.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee O'Brien Printing		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 324 Dorrance St		Amount 116.60	
City Bristol	State PA	Zip Code 19007-5109	Transaction ID : VN7CZA340Z4
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee O'Brien Printing		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 324 Dorrance St		Amount 116.60	
City Bristol	State PA	Zip Code 19007-5109	Transaction ID : VN7CZA3410Z
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee O'Brien Printing		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 324 Dorrance St		Amount 116.60	
City Bristol	State PA	Zip Code 19007-5109	Transaction ID : VN7CZA34110
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	349.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee O'Brien Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 324 Dorrance St		Amount 116.60	
City Bristol	State PA	Zip Code 19007-5109	Transaction ID : VN7CZA34128
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		126851.89	

Full Name (Last, First, Middle Initial) of Payee Eladio Olivo Martinez		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 6942 Keystone St Apt 2A		Amount 68.40	
City Philadelphia	State PA	Zip Code 19135-2040	Transaction ID : VN7CZA33YQ5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Eladio Olivo Martinez		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 6942 Keystone St Apt 2A		Amount 68.40	
City Philadelphia	State PA	Zip Code 19135-2040	Transaction ID : VN7CZA33ZS4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		126851.89	

(a) SUBTOTAL of Itemized Independent Expenditures.....	253.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shawn Olszewski		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 131 Harcourt Dr		Amount 68.40	
City Akron	State OH	Zip Code 44313-6508	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA346S9

Full Name (Last, First, Middle Initial) of Payee Shawn Olszewski		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 131 Harcourt Dr		Amount 68.40	
City Akron	State OH	Zip Code 44313-6508	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34847

Full Name (Last, First, Middle Initial) of Payee Aida Ortiz		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5924 Auver Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32807-3764	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA341K0

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Aida Ortiz		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5924 Auver Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32807-3764	Transaction ID : VN7CZA34363
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lesche Owens		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12001 Towa Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44108	Transaction ID : VN7CZA346Z7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lesche Owens		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12001 Towa Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44108	Transaction ID : VN7CZA348A4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shanell Pack		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7814 Empire Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32810-2618	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34252	

Full Name (Last, First, Middle Initial) of Payee Shanell Pack		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7814 Empire Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32810-2618	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA343N1	

Full Name (Last, First, Middle Initial) of Payee Richard Palmer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 710 Armandale St		Amount 49.53	
City Pittsburgh	State PA	Zip Code 15212-4078	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34K82	

(a) SUBTOTAL of Itemized Independent Expenditures.....	117.93
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Richard Palmer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 710 Armandale St		Amount 24.77	
City Pittsburgh	State PA	Zip Code 15212-4078	Transaction ID : VN7CZA34MB7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Richard Palmer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 710 Armandale St		Amount 24.77	
City Pittsburgh	State PA	Zip Code 15212-4078	Transaction ID : VN7CZA34NE3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Richard Palmer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 710 Armandale St		Amount 49.53	
City Pittsburgh	State PA	Zip Code 15212-4078	Transaction ID : VN7CZA34PH0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	99.07
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jasmyn Parham		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34S51
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jasmyn Parham		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34TT8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jasmyn Parham		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34WF7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jasmyn Parham		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34Y44
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michelle Parker		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1407 Evelyn St		Amount 7.13	
City Durham	State NC	Zip Code 27701-2715	Transaction ID : VN7CZA35174
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michelle Parker		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1407 Evelyn St		Amount 7.13	
City Durham	State NC	Zip Code 27701-2715	Transaction ID : VN7CZA35243
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	48.46
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Michelle Parker		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1407 Evelyn St		Amount 7.13	
City Durham	State NC	Zip Code 27701-2715	Transaction ID : VN7CZA354M3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Michelle Parker		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1407 Evelyn St		Amount 7.13	
City Durham	State NC	Zip Code 27701-2715	Transaction ID : VN7CZA355D0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Casohn Peoples		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6802 McKinley Ct		Amount 45.60	
City Clairton	State PA	Zip Code 15025-5149	Transaction ID : VN7CZA34KY6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	59.86
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Casohn Peoples		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6802 McKinley Ct		Amount 22.80	
City Clairton	State PA	Zip Code 15025-5149	Transaction ID : VN7CZA34N11
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Casohn Peoples		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6802 McKinley Ct		Amount 22.80	
City Clairton	State PA	Zip Code 15025-5149	Transaction ID : VN7CZA34P47
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Casohn Peoples		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6802 McKinley Ct		Amount 45.60	
City Clairton	State PA	Zip Code 15025-5149	Transaction ID : VN7CZA34Q72
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Alexander Perkins		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1461 Felton St		Amount 34.20	
City Deltona	State FL	Zip Code 32725-5936	Transaction ID : VN7CZA342J5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Alexander Perkins		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1461 Felton St		Amount 34.20	
City Deltona	State FL	Zip Code 32725-5936	Transaction ID : VN7CZA34424
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Peterman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 874 Garlow Blvd		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15239-1112	Transaction ID : VN7CZA34KZ4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee William Peterman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 874 Garlow Blvd		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15239-1112	Transaction ID : VN7CZA34N29
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee William Peterman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 874 Garlow Blvd		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15239-1112	Transaction ID : VN7CZA34P55
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee William Peterman		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 874 Garlow Blvd		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15239-1112	Transaction ID : VN7CZA34Q80
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Cristian Piccado		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA375Z6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Cristian Piccado		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA37661
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Cristian Piccado		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA376V7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Cristian Piccado		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	
Transaction ID : VN7CZA37722			
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Philip Piridy		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Transaction ID : VN7CZA34RZ4			
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Philip Piridy		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Transaction ID : VN7CZA34TM1			
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Philip Pirdy		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34W99	

Full Name (Last, First, Middle Initial) of Payee Philip Pirdy		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34XY6	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 33.02	
City Portland	State OR	Zip Code 97236-3342	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34FC5	

(a) SUBTOTAL of Itemized Independent Expenditures.....	101.42
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 33.02	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA34FN6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 33.02	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA34GH7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 33.02	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA34GT8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	99.06
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 4.17	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA34J80
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 4.17	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA34JD9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 4.17	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA34JW8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 4.17	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA34K17
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Latasha Powers		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2117 N Hastings St		Amount 34.20	
City Orlando	State FL	Zip Code 32808-4810	Transaction ID : VN7CZA34228
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Latasha Powers		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2117 N Hastings St		Amount 34.20	
City Orlando	State FL	Zip Code 32808-4810	Transaction ID : VN7CZA343J8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.57
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Wisdom Presley		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1952 Elston St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2719	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33YB0

Full Name (Last, First, Middle Initial) of Payee Wisdom Presley		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1952 Elston St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2719	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33ZD9

Full Name (Last, First, Middle Initial) of Payee Bajja Pritchard		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 841 Chislett St Apt 1		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15206-1301	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34M26

(a) SUBTOTAL of Itemized Independent Expenditures.....	182.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Bajia Pritchard		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 841 Chislett St Apt 1		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15206-1301	Transaction ID : VN7CZA34N52
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Bajia Pritchard		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 841 Chislett St Apt 1		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15206-1301	Transaction ID : VN7CZA34P89
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee Bajia Pritchard		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 841 Chislett St Apt 1		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15206-1301	Transaction ID : VN7CZA34QB3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Donna Putnam		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1021 Bellows Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43223-1517	Transaction ID : VN7CZA34A43
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Donna Putnam		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1021 Bellows Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43223-1517	Transaction ID : VN7CZA34B76
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joshua Quesada		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5424 Montague St		Amount 21.38	
City Philadelphia	State PA	Zip Code 19124-1417	Transaction ID : VN7CZA33Z56
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	158.18
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Joshua Quesada		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5424 Montague St		Amount 21.38	
City Philadelphia	State PA	Zip Code 19124-1417	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34074	

Full Name (Last, First, Middle Initial) of Payee Rachel King		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 72.67	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA345D2	

Full Name (Last, First, Middle Initial) of Payee Rachel King		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 72.67	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA345V2	

(a) SUBTOTAL of Itemized Independent Expenditures.....	166.72
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sadiqa Rahn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 16104 Scottsdale Blvd		Amount 68.40	
City Cleveland	State OH	Zip Code 44120-5037	Transaction ID : VN7CZA34770
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sadiqa Rahn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 16104 Scottsdale Blvd		Amount 68.40	
City Cleveland	State OH	Zip Code 44120-5037	Transaction ID : VN7CZA348J8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 423 Probasco St		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA34RH3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	183.88
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 423 Probasco St		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA34T62
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 423 Probasco St		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA34VV9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 423 Probasco St		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA34XG6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.24
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Edward Ray		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2915 Arlington Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15210-1947	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34M34

Full Name (Last, First, Middle Initial) of Payee Edward Ray		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2915 Arlington Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15210-1947	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34N60

Full Name (Last, First, Middle Initial) of Payee Edward Ray		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2915 Arlington Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15210-1947	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34P97

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Edward Ray		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2915 Arlington Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15210-1947	Transaction ID : VN7CZA34QC1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cindy Reed		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 23116 39th Ave E		Amount 6.63	
City Spanaway	State WA	Zip Code 98387-6964	Transaction ID : VN7CZA34582
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cindy Reed		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 23116 39th Ave E		Amount 6.12	
City Spanaway	State WA	Zip Code 98387-6964	Transaction ID : VN7CZA34590
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	58.35
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tameka Reeves		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2176 Haviland Dr Apt 7		Amount 68.40	
City Columbus	State OH	Zip Code 43207-2217	Transaction ID : VN7CZA34AC6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tameka Reeves		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2176 Haviland Dr Apt 7		Amount 68.40	
City Columbus	State OH	Zip Code 43207-2217	Transaction ID : VN7CZA34BF9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Davaughn Reid		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34SV5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Davaughn Reid		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34VG2
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Davaughn Reid		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34X51
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 434889.86		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Davaughn Reid		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34YT7
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 434889.86		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Craig Rembert		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3513 Wells St		Amount 34.20	
City Orlando	State FL	Zip Code 32805-4286	Transaction ID : VN7CZA342C7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Craig Rembert		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3513 Wells St		Amount 34.20	
City Orlando	State FL	Zip Code 32805-4286	Transaction ID : VN7CZA343W7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jasua Render		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7701 Camden Ave		Amount 79.34	
City Cleveland	State OH	Zip Code 44102-5024	Transaction ID : VN7CZA346B9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	147.74
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jasua Render		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7701 Camden Ave		Amount 79.34	
City Cleveland	State OH	Zip Code 44102-5024	Transaction ID : VN7CZA347P6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tarah Reppert		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 740 E Vernon Rd Apt 310		Amount 91.64	
City Philadelphia	State PA	Zip Code 19119-1508	Transaction ID : VN7CZA33Y53
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tarah Reppert		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 740 E Vernon Rd Apt 310		Amount 91.64	
City Philadelphia	State PA	Zip Code 19119-1508	Transaction ID : VN7CZA33Z71
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	262.62
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Iris Rivera		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7350 Westpointe Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32835-6192	Transaction ID : VN7CZA341H4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Iris Rivera		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7350 Westpointe Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32835-6192	Transaction ID : VN7CZA34347
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marceia Robinson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 62 N 17th St		Amount 68.40	
City Columbus	State OH	Zip Code 43203-1801	Transaction ID : VN7CZA34AA0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Marceia Robinson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 62 N 17th St		Amount 68.40	
City Columbus	State OH	Zip Code 43203-1801	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Robinson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Robinson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Robinson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34WJ1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Robinson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34Y77
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA350W7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA351Q0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA35496
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA35523
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Edriel Rodriguez		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3194 Mapleshade St		Amount 34.20	
City Deltona	State FL	Zip Code 32738-4472	Transaction ID : VN7CZA342K3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Edriel Rodriguez		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3194 Mapleshade St		Amount 34.20	
City Deltona	State FL	Zip Code 32738-4472	Transaction ID : VN7CZA34432
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jeanette Rose		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5590 Gary Ave		Amount 68.40	
City Bedford	State OH	Zip Code 44146-2453	Transaction ID : VN7CZA347C9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jeanette Rose		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5590 Gary Ave		Amount 68.40	
City Bedford	State OH	Zip Code 44146-2453	Transaction ID : VN7CZA348Q7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Forest Ruge-Whitacre		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 44.17	
City Pittsburgh	State PA	Zip Code 15221-3510	Transaction ID : VN7CZA34KD2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Forest Ruge-Whitacre		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 22.09	
City Pittsburgh	State PA	Zip Code 15221-3510	Transaction ID : VN7CZA34MG6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	134.66
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Forest Ruge-Whitacre		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 22.09	
City Pittsburgh	State PA	Zip Code 15221-3510	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Forest Ruge-Whitacre		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 44.17	
City Pittsburgh	State PA	Zip Code 15221-3510	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Luzmeilyn Ruiz		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 451 S Semoran Blvd Apt 101		Amount 47.06	
City Orlando	State FL	Zip Code 32807-4301	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	113.32
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Luzmeilyn Ruiz		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 451 S Semoran Blvd Apt 101		Amount 47.06	
City Orlando	State FL	Zip Code 32807-4301	Transaction ID : VN7CZA342Q4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Leila Russell		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1409 Flora Lee Dr		Amount 34.20	
City Leesburg	State FL	Zip Code 34748-3464	Transaction ID : VN7CZA341N6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Leila Russell		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1409 Flora Lee Dr		Amount 34.20	
City Leesburg	State FL	Zip Code 34748-3464	Transaction ID : VN7CZA34389
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.46
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12616 NE 79th St		Amount 33.02	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA350X5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12616 NE 79th St		Amount 33.02	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA351R8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12616 NE 79th St		Amount 33.02	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA354A4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	99.06
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12616 NE 79th St		Amount 33.02	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA35531
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12616 NE 79th St		Amount 4.00	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA358X3
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12616 NE 79th St		Amount 4.50	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA35948
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.52
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12616 NE 79th St		Amount 4.00	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA359S4
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12616 NE 79th St		Amount 4.00	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA35A07
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Yawo Sadj		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6658 Seahurst Dr		Amount 68.40	
City Canal Winchester	State OH	Zip Code 43110-9017	Transaction ID : VN7CZA34AP2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Yawo Sadij		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6658 Seahurst Dr		Amount 68.40	
City Canal Winchester	State OH	Zip Code 43110-9017	Transaction ID : VN7CZA34BR0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Samuel Ortiz		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7859 BS South Shore Dr. apt 3W		Amount 104.02	
City Chicago	State IL	Zip Code 60649	Transaction ID : VN7CZA345F7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Samuel Ortiz		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7859 BS South Shore Dr. apt 3W		Amount 104.02	
City Chicago	State IL	Zip Code 60649	Transaction ID : VN7CZA345W0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	276.44
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address Whisperwood Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27616	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34F91
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address Whisperwood Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27616	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34FJ2
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address Whisperwood Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27616	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34GE3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address Whisperwood Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27616	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34GQ4
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Sarah Jackson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 638 N Saint Louis Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60624-1365	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA345J1
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought 40940.56		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Sarah Jackson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 638 N Saint Louis Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60624-1365	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA345Z4
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought 40940.56		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shaakira Sargent		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 36.34	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34RS7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shaakira Sargent		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 36.34	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34TE3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shaakira Sargent		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 36.34	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34W32
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	109.02
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shaakira Sargent		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 36.34	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34XR9	

Full Name (Last, First, Middle Initial) of Payee Pedro Sarsama		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4507 W 20th St		Amount 55.86	
City Cleveland	State OH	Zip Code 44109-4443	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA347E5	

Full Name (Last, First, Middle Initial) of Payee Pedro Sarsama		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4507 W 20th St		Amount 55.86	
City Cleveland	State OH	Zip Code 44109-4443	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA348S3	

(a) SUBTOTAL of Itemized Independent Expenditures.....	148.06
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee ZhaiRon Scales		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2308 Argyle Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43219-1404	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34AE2

Full Name (Last, First, Middle Initial) of Payee ZhaiRon Scales		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2308 Argyle Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43219-1404	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34BH5

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 46.03	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34SZ7

(a) SUBTOTAL of Itemized Independent Expenditures.....	182.83
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 46.03	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA34VM4
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 46.03	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA34X92
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	
		434889.86	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 46.03	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA34YY9
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	
		434889.86	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	138.09
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee David Schlosser		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3 Kingsland Dr		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15202-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34KK9

Full Name (Last, First, Middle Initial) of Payee David Schlosser		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3 Kingsland Dr		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15202-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34MP4

Full Name (Last, First, Middle Initial) of Payee David Schlosser		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3 Kingsland Dr		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15202-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34NS0

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee David Schlosser		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3 Kingsland Dr		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15202-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34PW7

Full Name (Last, First, Middle Initial) of Payee Mary Senteney		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34SQ4

Full Name (Last, First, Middle Initial) of Payee Mary Senteney		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34VC0

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Mary Senteney		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34X19
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mary Senteney		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34YP6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Serrin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1730 Gurtler Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32804-6427	Transaction ID : VN7CZA34210
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Serrin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1730 Gurtler Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32804-6427	Transaction ID : VN7CZA343H0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sahro Sharif		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2156 Margo Rd		Amount 68.40	
City Columbus	State OH	Zip Code 43229-5768	Transaction ID : VN7CZA34AW9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sahro Sharif		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2156 Margo Rd		Amount 68.40	
City Columbus	State OH	Zip Code 43229-5768	Transaction ID : VN7CZA34BY8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sheetz (484)		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3941 W Market St Greensboro		Amount 6.38	
City Greensboro	State NC	Zip Code 27407-1303	Transaction ID : VN7CZA377B3
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sheetz (484)		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3941 W Market St Greensboro		Amount 6.38	
City Greensboro	State NC	Zip Code 27407-1303	Transaction ID : VN7CZA377M4
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sheetz (484)		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3941 W Market St Greensboro		Amount 6.38	
City Greensboro	State NC	Zip Code 27407-1303	Transaction ID : VN7CZA378F5
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	19.14
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sheetz (484)		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 3941 W Market St Greensboro		Amount 6.38	
City Greensboro	State NC	Zip Code 27407-1303	
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA378R6

Full Name (Last, First, Middle Initial) of Payee Sheetz 189		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 1505 Pittsburgh St		Amount 9.24	
City Cheswick	State PA	Zip Code 15024-1521	
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34QH1

Full Name (Last, First, Middle Initial) of Payee Sheetz 189		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 1505 Pittsburgh St		Amount 4.62	
City Cheswick	State PA	Zip Code 15024-1521	
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34QS4

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.24
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sheetz 189		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1505 Pittsburgh St		Amount 4.62	
City Cheswick	State PA	Zip Code 15024-1521	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA34R17
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		126851.89	

Full Name (Last, First, Middle Initial) of Payee Sheetz 189		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1505 Pittsburgh St		Amount 10.03	
City Cheswick	State PA	Zip Code 15024-1521	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA34R90
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		126851.89	

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 7.58	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA34466
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		5628.98	

(a) SUBTOTAL of Itemized Independent Expenditures.....	22.23
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 4.81	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34473

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 7.43	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34481

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 6.08	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34499

(a) SUBTOTAL of Itemized Independent Expenditures.....	18.32
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 7.16	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA344A7
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 8.86	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA344B5
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 7.18	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA344C1
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	23.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 4.60	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA344D9
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 7.00	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA344Q8
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 4.44	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA344R6
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.04
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 6.86	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA344S4
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 5.61	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA344T2
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 6.61	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA344V9
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	19.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 8.17	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA344W7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 6.63	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA344X5
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 4.25	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA344Y3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	19.05
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Gianna Simmons		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 66.04	
City New Florence	State PA	Zip Code 15944-8402	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34KE0

Full Name (Last, First, Middle Initial) of Payee Gianna Simmons		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 33.02	
City New Florence	State PA	Zip Code 15944-8402	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34MH4

Full Name (Last, First, Middle Initial) of Payee Gianna Simmons		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 33.02	
City New Florence	State PA	Zip Code 15944-8402	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34NM1

(a) SUBTOTAL of Itemized Independent Expenditures.....	132.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Gianna Simmons		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 66.04	
City New Florence	State PA	Zip Code 15944-8402	Transaction ID : VN7CZA34PQ7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Christopher Simons		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 731 York Ave		Amount 68.40	
City Swarthmore	State PA	Zip Code 19081	Transaction ID : VN7CZA33YV7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Christopher Simons		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 731 York Ave		Amount 68.40	
City Swarthmore	State PA	Zip Code 19081	Transaction ID : VN7CZA33ZX5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	202.84
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34RT5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34TF1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34W40
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34XS7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34S28
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34TQ4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34WC3	

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34Y10	

Full Name (Last, First, Middle Initial) of Payee Yasin Southall		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34SA1	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Yasin Southall		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34TZ8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Yasin Southall		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34WM6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Yasin Southall		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34Y93
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Mister Sparks		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1091 E 21st Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43211-2409	Transaction ID : VN7CZA34AQ0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mister Sparks		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1091 E 21st Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43211-2409	Transaction ID : VN7CZA34BS8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1626 W 5th Ave		Amount 12.13	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA34C87
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	148.93
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 1626 W 5th Ave		Amount 15.04	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA34C95
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 1626 W 5th Ave		Amount 12.87	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA34CG0
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 1626 W 5th Ave		Amount 15.96	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA34CH8
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	43.87
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Marcus Spencer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7241 Ogontz Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-1303	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA33YM1

Full Name (Last, First, Middle Initial) of Payee Marcus Spencer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 7241 Ogontz Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-1303	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		126851.89	

Transaction ID : VN7CZA33ZP0

Full Name (Last, First, Middle Initial) of Payee Whitney Spitzer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1909 Williams Manor Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32811-4130	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		5628.98	

Transaction ID : VN7CZA34294

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Whitney Spitzer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1909 Williams Manor Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32811-4130	Transaction ID : VN7CZA343S3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kristy Steele		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1404 Larchmont Rd		Amount 68.40	
City Cleveland	State OH	Zip Code 44110-2814	Transaction ID : VN7CZA34705
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kristy Steele		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1404 Larchmont Rd		Amount 68.40	
City Cleveland	State OH	Zip Code 44110-2814	Transaction ID : VN7CZA348B2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Anjol Stevens		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3941 Eastbury Rd		Amount 68.40	
City South Euclid	State OH	Zip Code 44118	Transaction ID : VN7CZA346E2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Anjol Stevens		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3941 Eastbury Rd		Amount 68.40	
City South Euclid	State OH	Zip Code 44118	Transaction ID : VN7CZA347S0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Anthony Stewart		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6400 Lee Rd S		Amount 55.86	
City Cleveland	State OH	Zip Code 44137-4541	Transaction ID : VN7CZA347D7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	192.66
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Anthony Stewart		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 6400 Lee Rd S		Amount 55.86	
City Cleveland	State OH	Zip Code 44137-4541	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Transaction ID : VN7CZA348R5

Full Name (Last, First, Middle Initial) of Payee Katie Suggs		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1962 Spring St		Amount 47.06	
City Winter Park	State FL	Zip Code 32792-1721	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		5628.98	

Transaction ID : VN7CZA342G9

Full Name (Last, First, Middle Initial) of Payee Katie Suggs		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1962 Spring St		Amount 47.06	
City Winter Park	State FL	Zip Code 32792-1721	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA34408

(a) SUBTOTAL of Itemized Independent Expenditures.....	149.98
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sunoco		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 100 W Queen Ln		Amount 25.00	
City Philadelphia	State PA	Zip Code 19144-6224	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA340B6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Sunoco		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 100 W Queen Ln		Amount 20.57	
City Philadelphia	State PA	Zip Code 19144-6224	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA340C4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Sunoco		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 100 W Queen Ln		Amount 25.00	
City Philadelphia	State PA	Zip Code 19144-6224	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA340M7
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	70.57
(b) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sunoco		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 100 W Queen Ln		Amount 20.57	
City Philadelphia	State PA	Zip Code 19144-6224	Transaction ID : VN7CZA340N5
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Surface		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34ST7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Surface		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34VF4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	88.97
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kevin Surface		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34X43	

Full Name (Last, First, Middle Initial) of Payee Kevin Surface		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34YS9	

Full Name (Last, First, Middle Initial) of Payee John Sweeney		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2528 Jay Ave # C		Amount 68.40	
City Cleveland	State OH	Zip Code 44113-3072	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA346G8	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee John Sweeney		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2528 Jay Ave # C		Amount 68.40	
City Cleveland	State OH	Zip Code 44113-3072	Transaction ID : VN7CZA347V6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

Full Name (Last, First, Middle Initial) of Payee Leon Taylor		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 597 Stanley Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43206-2418	Transaction ID : VN7CZA34AX7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Leon Taylor		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 597 Stanley Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43206-2418	Transaction ID : VN7CZA34BZ6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Telian		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15224-1776	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34KG6

Full Name (Last, First, Middle Initial) of Payee Michael Telian		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15224-1776	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34MK0

Full Name (Last, First, Middle Initial) of Payee Michael Telian		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15224-1776	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34NP7

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Telian		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15224-1776	Transaction ID : VN7CZA34PS3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee Dereck Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1114 Rebecca Ave		Amount 37.05	
City Braddock	State PA	Zip Code 15104-2672	Transaction ID : VN7CZA34K90
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Dereck Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1114 Rebecca Ave		Amount 18.52	
City Braddock	State PA	Zip Code 15104-2672	Transaction ID : VN7CZA34MC5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	101.17
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Dereck Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1114 Rebecca Ave		Amount 18.52	
City Braddock	State PA	Zip Code 15104-2672	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34NF1

Full Name (Last, First, Middle Initial) of Payee Dereck Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1114 Rebecca Ave		Amount 37.05	
City Braddock	State PA	Zip Code 15104-2672	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34PJ8

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1701 Sterling Rd		Amount 22.80	
City Park Forest	State IL	Zip Code 60466	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34FD3

(a) SUBTOTAL of Itemized Independent Expenditures.....	78.37
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1701 Sterling Rd		Amount 22.80	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA34FP4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1701 Sterling Rd		Amount 22.80	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA34GJ5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1701 Sterling Rd		Amount 22.80	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA34GV6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA34JA5
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA34JF5
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA34JY3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA34K33
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Mastrogiacomo Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4639 Umbria St Apt 2		Amount 21.38	
City Philadelphia	State PA	Zip Code 19127-1919	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA33Z30
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Mastrogiacomo Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4639 Umbria St Apt 2		Amount 21.38	
City Philadelphia	State PA	Zip Code 19127-1919	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34058
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	46.93
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Rodney Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 302 W Nedro Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1833	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA33YS1

Full Name (Last, First, Middle Initial) of Payee Rodney Thomas		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 302 W Nedro Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1833	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		126851.89	

Transaction ID : VN7CZA33ZV9

Full Name (Last, First, Middle Initial) of Payee Jarrett Thompson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2352 Woodcrest Dr		Amount 47.06	
City Winter Park	State FL	Zip Code 32792-5421	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		5628.98	

Transaction ID : VN7CZA34244

(a) SUBTOTAL of Itemized Independent Expenditures.....	183.86
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jarrett Thompson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2352 Woodcrest Dr		Amount 47.06	
City Winter Park	State FL	Zip Code 32792-5421	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA343M3

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34RV2

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34TG9

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.46
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34W58	

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34XT5	

Full Name (Last, First, Middle Initial) of Payee Nicholas Tompkins		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34SR2	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nicholas Tompkins		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA34VD8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

Full Name (Last, First, Middle Initial) of Payee Nicholas Tompkins		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA34X27
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

Full Name (Last, First, Middle Initial) of Payee Nicholas Tompkins		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA34YQ4
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3250 Rider Trl S		Amount 41.04	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA34F75
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3250 Rider Trl S		Amount 41.04	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA34FG6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3250 Rider Trl S		Amount 41.04	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA34GC8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	123.12
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3250 Rider Trl S		Amount 41.04	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34GN9

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3250 Rider Trl S		Amount 4.17	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34J72

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3250 Rider Trl S		Amount 4.17	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34JC1

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.38
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3250 Rider Trl S		Amount 4.17	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		648181.85	

Transaction ID : VN7CZA34JV0

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3250 Rider Trl S		Amount 4.17	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		648181.85	

Transaction ID : VN7CZA34K09

Full Name (Last, First, Middle Initial) of Payee Ali Totten		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2091 Creekview Ct Apt C		Amount 68.40	
City Reynoldsburg	State OH	Zip Code 43068-4253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		648181.85	

Transaction ID : VN7CZA34A76

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.74
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ali Totten		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2091 Creekview Ct Apt C		Amount 68.40	
City Reynoldsburg	State OH	Zip Code 43068-4253	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34BA0	

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34RW0	

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34TH7	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34W66	

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34XV2	

Full Name (Last, First, Middle Initial) of Payee Courtney Troup		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4106 Howley St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15224-1419	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34KC4	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Courtney Troup		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4106 Howley St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15224-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34MF8

Full Name (Last, First, Middle Initial) of Payee Courtney Troup		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4106 Howley St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15224-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34NJ5

Full Name (Last, First, Middle Initial) of Payee Courtney Troup		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4106 Howley St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15224-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34PN1

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Christina Tull		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 91 Kittanning Pike		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15215-1345	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34KJ1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Christina Tull		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 91 Kittanning Pike		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15215-1345	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34MN6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Christina Tull		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 91 Kittanning Pike		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15215-1345	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34NR2
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Christina Tull		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 91 Kittanning Pike		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15215-1345	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34PV9

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34SK2

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA34V89

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Keith Turner		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1754 Lee Rd		Amount 68.40	
City Cleveland Hts	State OH	Zip Code 44118-1736	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Keith Turner		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1754 Lee Rd		Amount 68.40	
City Cleveland Hts	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA347Y0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

Full Name (Last, First, Middle Initial) of Payee Robert Ulmer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 726 Marlyn Rd		Amount 68.40	
City Philadelphia	State PA	Zip Code 19151-3825	Transaction ID : VN7CZA33YP7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Robert Ulmer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 726 Marlyn Rd		Amount 68.40	
City Philadelphia	State PA	Zip Code 19151-3825	Transaction ID : VN7CZA33ZR6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shuntell Ulmer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34SG8

Full Name (Last, First, Middle Initial) of Payee Shuntell Ulmer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34V55

Full Name (Last, First, Middle Initial) of Payee Shuntell Ulmer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA34WT4

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shuntell Ulmer		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34YF0	

Full Name (Last, First, Middle Initial) of Payee Jesse Umoette		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2436 Winding Hills Ct		Amount 68.40	
City Columbus	State OH	Zip Code 43224-3018	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34AS5	

Full Name (Last, First, Middle Initial) of Payee Jesse Umoette		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2436 Winding Hills Ct		Amount 68.40	
City Columbus	State OH	Zip Code 43224-3018	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA34BW2	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Brandon Ushry		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5120 Hawaiian Ter Apt 5		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1167	Transaction ID : VN7CZA34T21
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brandon Ushry		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5120 Hawaiian Ter Apt 5		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1167	Transaction ID : VN7CZA34VQ7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brandon Ushry		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5120 Hawaiian Ter Apt 5		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1167	Transaction ID : VN7CZA34XC4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Brandon Ushry		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 5120 Hawaiian Ter Apt 5		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1167	Transaction ID : VN7CZA34Z13
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 28.50	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA350P9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 28.50	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA351G5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 28.50	
City Chicago	State IL	Zip Code 60623-1893	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 28.50	
City Chicago	State IL	Zip Code 60623-1893	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.00	
City Chicago	State IL	Zip Code 60623-1893	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	61.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.50	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA35930
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.00	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA359R6
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.00	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA359Z9
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Andy Vazquez		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 829 Glastonbury Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34758-2607	Transaction ID : VN7CZA341E0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Andy Vazquez		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 829 Glastonbury Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34758-2607	Transaction ID : VN7CZA34313
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tracy Vazquez		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 829 Glastonbury Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34758-2607	Transaction ID : VN7CZA341D2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tracy Vazquez		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 829 Glastonbury Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34758-2607	Transaction ID : VN7CZA34305
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Roberto Velazquez		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 108 Puelba Ln		Amount 34.20	
City Kissimmee	State FL	Zip Code 34743-9218	Transaction ID : VN7CZA34151
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Roberto Velazquez		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 108 Puelba Ln		Amount 34.20	
City Kissimmee	State FL	Zip Code 34743-9218	Transaction ID : VN7CZA342R2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee AnnMarie Viehweger		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4841 Ute St		Amount 34.20	
City Orlando	State FL	Zip Code 32819-8452	Transaction ID : VN7CZA34177
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 5628.98			

Full Name (Last, First, Middle Initial) of Payee AnnMarie Viehweger		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 4841 Ute St		Amount 34.20	
City Orlando	State FL	Zip Code 32819-8452	Transaction ID : VN7CZA342T8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 648181.85			

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 307 W 6th St		Amount 4.17	
City Royal Oak	State MI	Zip Code 48067-2548	Transaction ID : VN7CZA34J64
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 33651.35			

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.57
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 307 W 6th St		Amount 4.17	
City Royal Oak	State MI	Zip Code 48067-2548	Transaction ID : VN7CZA34JB3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 307 W 6th St		Amount 4.17	
City Royal Oak	State MI	Zip Code 48067-2548	Transaction ID : VN7CZA34JT2
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 307 W 6th St		Amount 4.17	
City Royal Oak	State MI	Zip Code 48067-2548	Transaction ID : VN7CZA34JZ1
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Damon Walker		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1949 Millvale Ct		Amount 47.08	
City Cincinnati	State OH	Zip Code 45225-1210	Transaction ID : VN7CZA34SX1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Damon Walker		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1949 Millvale Ct		Amount 47.08	
City Cincinnati	State OH	Zip Code 45225-1210	Transaction ID : VN7CZA34VJ8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Damon Walker		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1949 Millvale Ct		Amount 47.08	
City Cincinnati	State OH	Zip Code 45225-1210	Transaction ID : VN7CZA34X76
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.24
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Damon Walker		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1949 Millvale Ct		Amount 47.08	
City Cincinnati	State OH	Zip Code 45225-1210	Transaction ID : VN7CZA34YW3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Darnell Walker		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1990 Ford Dr		Amount 68.40	
City Cleveland	State OH	Zip Code 44106-3900	Transaction ID : VN7CZA347F3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Darnell Walker		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1990 Ford Dr		Amount 68.40	
City Cleveland	State OH	Zip Code 44106-3900	Transaction ID : VN7CZA348T1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	183.88
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Alexander Walsh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 100 McEntee St Apt 2		Amount 68.40	
City Kingston	State NY	Zip Code 12401-5956	Transaction ID : VN7CZA33YE4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Alexander Walsh		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 100 McEntee St Apt 2		Amount 68.40	
City Kingston	State NY	Zip Code 12401-5956	Transaction ID : VN7CZA33ZG3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Domonique Walters		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1710 W 16th St		Amount 34.20	
City Sanford	State FL	Zip Code 32771-3107	Transaction ID : VN7CZA34203
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Domonique Walters		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1710 W 16th St		Amount 34.20	
City Sanford	State FL	Zip Code 32771-3107	Transaction ID : VN7CZA343G2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chris Walton		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34S93
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chris Walton		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34TY0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Chris Walton		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34WK8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chris Walton		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA34Y85
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shante Washington		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12009 Saywell Ave		Amount 55.86	
City Cleveland	State OH	Zip Code 44108-3834	Transaction ID : VN7CZA347H7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	124.26
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shante Washington		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 12009 Saywell Ave		Amount 55.86	
City Cleveland	State OH	Zip Code 44108-3834	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA348W7	

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 000		Amount 4.17	
City Greensboro	State NC	Zip Code 27407	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA378V9	

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 000		Amount 4.17	
City Greensboro	State NC	Zip Code 27407	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA378Y3	

(a) SUBTOTAL of Itemized Independent Expenditures.....	64.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 000		Amount 4.17	
City Greensboro	State NC	Zip Code 27407	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA37974
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 000		Amount 4.17	
City Greensboro	State NC	Zip Code 27407	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA379A8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Suphie Wesner		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3046 Woodbury Rd		Amount 68.40	
City Shaker Hts	State OH	Zip Code 44120-2441	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA34788
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	76.74
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Suphie Wesner		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 3046 Woodbury Rd		Amount 68.40	
City Shaker Hts	State OH	Zip Code 44120-2441	Transaction ID : VN7CZA348K5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Latasha Wilkins		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2700 Herdon Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704	Transaction ID : VN7CZA35124
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Latasha Wilkins		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2700 Herdon Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704	Transaction ID : VN7CZA351Y5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Latasha Wilkins		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2700 Herdon Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA354F3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Latasha Wilkins		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2700 Herdon Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35581
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Octavion Wilson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2665 E Juliet Dr		Amount 10.69	
City Deltona	State FL	Zip Code 32738-2435	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA342N8
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought 5628.98		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	56.29
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Octavion Wilson		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 2665 E Juliet Dr		Amount 10.69	
City Deltona	State FL	Zip Code 32738-2435	Transaction ID : VN7CZA34458
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brian Wimbley		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 13805 Argus Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44110-2115	Transaction ID : VN7CZA347G9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brian Wimbley		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 13805 Argus Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44110-2115	Transaction ID : VN7CZA348V9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	147.49
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA34090
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA340A8
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA340J1
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	163.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA340K9
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		126851.89	

Full Name (Last, First, Middle Initial) of Payee Getenesh Yilma		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 1208 Fairmont St NW Apt B		Amount 2.99	
City Washington	State DC	Zip Code 20009-5491	Transaction ID : VN7CZA341Y7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		5628.98	

Full Name (Last, First, Middle Initial) of Payee Getenesh Yilma		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2016	
Mailing Address 1208 Fairmont St NW Apt B		Amount 2.99	
City Washington	State DC	Zip Code 20009-5491	Transaction ID : VN7CZA34AF9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

(a) SUBTOTAL of Itemized Independent Expenditures.....	60.48
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Getenesh Yilma		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1208 Fairmont St NW Apt B		Amount 2.99	
City Washington	State DC	Zip Code 20009-5491	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		126851.89	

Transaction ID : VN7CZA34K59

Full Name (Last, First, Middle Initial) of Payee Getenesh Yilma		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 1208 Fairmont St NW Apt B		Amount 3.18	
City Washington	State DC	Zip Code 20009-5491	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA350F6

Full Name (Last, First, Middle Initial) of Payee Jennifer Zokaite		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15229-1825	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA34K41

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.77
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jennifer Zokaite		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15229-1825	Transaction ID : VN7CZA34M83
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jennifer Zokaite		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15229-1825	Transaction ID : VN7CZA34NB0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jennifer Zokaite		Date of Public Distribution/Dissemination 09 / 08 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15229-1825	Transaction ID : VN7CZA34PE6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA35ZY6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA360Q4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA36324
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA363T4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Samuel Abraham		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 5543 Minaret Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32821-8120	Transaction ID : VN7CZA36H17
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Samuel Abraham		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 5543 Minaret Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32821-8120	Transaction ID : VN7CZA36JK0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Pedro Acosta		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3827 N Franklin St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19140-3228	Transaction ID : VN7CZA35M90
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Pedro Acosta		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3827 N Franklin St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19140-3228	Transaction ID : VN7CZA35NA0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Stefan Adams		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2746 Atwood Ter		Amount 68.40	
City Columbus	State OH	Zip Code 43211-1108	Transaction ID : VN7CZA35PC7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Stefan Adams		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2746 Atwood Ter		Amount 68.40	
City Columbus	State OH	Zip Code 43211-1108	Transaction ID : VN7CZA35QJ7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Full Name (Last, First, Middle Initial) of Payee William Allen		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3431 1st Ave		Amount 68.40	
City Urbancrest	State OH	Zip Code 43123-1311	Transaction ID : VN7CZA35PV5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee William Allen		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3431 1st Ave		Amount 68.40	
City Urbancrest	State OH	Zip Code 43123-1311	Transaction ID : VN7CZA35R16
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Noah Alloy		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 973 Mount Vernon Ave Apt A		Amount 68.40	
City Columbus	State OH	Zip Code 43203-1573	Transaction ID : VN7CZA35PE3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Noah Alloy		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 973 Mount Vernon Ave Apt A		Amount 68.40	
City Columbus	State OH	Zip Code 43203-1573	Transaction ID : VN7CZA35QM3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Alvaro Alva		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2313 N Park Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA35KP0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Alvaro Alva		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2313 N Park Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4512	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35MQ0	

Full Name (Last, First, Middle Initial) of Payee Ryan Anders		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1954 Amato Dr		Amount 45.60	
City North Versailles	State PA	Zip Code 15137-2735	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35V52	

Full Name (Last, First, Middle Initial) of Payee Ryan Anders		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1954 Amato Dr		Amount 22.80	
City North Versailles	State PA	Zip Code 15137-2735	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35W88	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ryan Anders		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1954 Amato Dr		Amount 22.80	
City North Versailles	State PA	Zip Code 15137-2735	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35XA5
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Ryan Anders		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1954 Amato Dr		Amount 45.60	
City North Versailles	State PA	Zip Code 15137-2735	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35YC3
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee John Anderson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 714 Watt Ln		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15219-4218	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35VC7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee John Anderson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 714 Watt Ln		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15219-4218	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35WF3
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee John Anderson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 714 Watt Ln		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15219-4218	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35XH0
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee John Anderson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 714 Watt Ln		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15219-4218	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35YK9
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Lyric Anderson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3242 N 6th St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19140-5643	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35KT1

Full Name (Last, First, Middle Initial) of Payee Lyric Anderson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3242 N 6th St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19140-5643	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35MV2

Full Name (Last, First, Middle Initial) of Payee Andreka Wilkes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12750 S Union Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60628-7043	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35FC3

(a) SUBTOTAL of Itemized Independent Expenditures.....	196.15
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Andreka Wilkes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12750 S Union Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60628-7043	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35FP2

Full Name (Last, First, Middle Initial) of Payee Meagan Andrews		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 441 Magnolia Ave		Amount 21.38	
City Cuyahoga Falls	State OH	Zip Code 44221-5133	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35Q21

Full Name (Last, First, Middle Initial) of Payee Meagan Andrews		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 441 Magnolia Ave		Amount 21.38	
City Cuyahoga Falls	State OH	Zip Code 44221-5133	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35R81

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.11
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Angela Oliver		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 47515 S Vincennes Ave Apt 2		Amount 72.67	
City Chicago	State IL	Zip Code 60643	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Angela Oliver		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 47515 S Vincennes Ave Apt 2		Amount 72.67	
City Chicago	State IL	Zip Code 60643	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Avis-Morrisville		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Drive		Amount 6.60	
City Morrisville	State NC	Zip Code 27560	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	151.94
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Avis-Morrisville		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Drive		Amount 6.60	
City Morrisville	State NC	Zip Code 27560	Transaction ID : VN7CZA36XQ6
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Avis-Morrisville		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Drive		Amount 6.60	
City Morrisville	State NC	Zip Code 27560	Transaction ID : VN7CZA36YR7
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Avis-Morrisville		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Drive		Amount 6.60	
City Morrisville	State NC	Zip Code 27560	Transaction ID : VN7CZA36Z32
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	19.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Carlos Badaraco		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 34.20	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA36FX2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Carlos Badaraco		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 34.20	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA36HG5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jacob Baldwin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3633 Spring Garden St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19104-2351	Transaction ID : VN7CZA35KV9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jacob Baldwin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3633 Spring Garden St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19104-2351	Transaction ID : VN7CZA35MW0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee Andrea Barrow		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4088 Suffolk Rd		Amount 68.40	
City Cleveland	State OH	Zip Code 44121-2357	Transaction ID : VN7CZA35G01
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Andrea Barrow		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4088 Suffolk Rd		Amount 68.40	
City Cleveland	State OH	Zip Code 44121-2357	Transaction ID : VN7CZA35HC7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Barbara Battle		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7325 Beacon Hill Loop Apt 5		Amount 34.20	
City Orlando	State FL	Zip Code 32818-6426	Transaction ID : VN7CZA36FV6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Barbara Battle		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7325 Beacon Hill Loop Apt 5		Amount 34.20	
City Orlando	State FL	Zip Code 32818-6426	Transaction ID : VN7CZA36HE9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Richard Beadling		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4225 1/2 Murray Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15217-2948	Transaction ID : VN7CZA35V10
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Richard Beadling		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4225 1/2 Murray Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15217-2948	Transaction ID : VN7CZA35W47
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Richard Beadling		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4225 1/2 Murray Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15217-2948	Transaction ID : VN7CZA35X63
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Richard Beadling		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4225 1/2 Murray Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15217-2948	Transaction ID : VN7CZA35Y82
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Begin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12050 Lake Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1892	Transaction ID : VN7CZA35GG6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Begin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12050 Lake Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1892	Transaction ID : VN7CZA35HW3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Austin Benjamin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1674 Monica St		Amount 34.20	
City Deltona	State FL	Zip Code 32725-3968	Transaction ID : VN7CZA36GH0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Austin Benjamin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1674 Monica St		Amount 34.20	
City Deltona	State FL	Zip Code 32725-3968	Transaction ID : VN7CZA36J43
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36M05
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36NJ0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36Q43
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36RP8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Genesson Beraut		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 906 Fenmdell Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA36FY0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Genesson Beraut		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 906 Fenmdell Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32808	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36HH3

Full Name (Last, First, Middle Initial) of Payee Thomas Berrian		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6714 Christopher Park Ln		Amount 68.40	
City Canal Winchester	State OH	Zip Code 43110-8510	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35PK2

Full Name (Last, First, Middle Initial) of Payee Thomas Berrian		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6714 Christopher Park Ln		Amount 68.40	
City Canal Winchester	State OH	Zip Code 43110-8510	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35QS2

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Regina Berry		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36MN1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Regina Berry		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36P74
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Regina Berry		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36QS9
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input checked="" type="checkbox"/> Senate	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 434889.86		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Regina Berry		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36SB2	

Full Name (Last, First, Middle Initial) of Payee Ahmed Bilal		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA370W2	

Full Name (Last, First, Middle Initial) of Payee Ahmed Bilal		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA371E4	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ahmed Bilal		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA37349
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ahmed Bilal		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA373P1
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Billy Lott		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1617 N Lorel Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60639-4313	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35FA8
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought 40940.56		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	104.95
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Billy Lott		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1617 N Lorel Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60639-4313	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35FM7	

Full Name (Last, First, Middle Initial) of Payee Jawneisha Bland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3399 E 65th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44127-1952	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35GX8	

Full Name (Last, First, Middle Initial) of Payee Jawneisha Bland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3399 E 65th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44127-1952	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35J96	

(a) SUBTOTAL of Itemized Independent Expenditures.....	196.15
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Joshua Bland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1026 Jefferson Ave		Amount 68.40	
City Akron	State OH	Zip Code 44302-1046	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Joshua Bland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1026 Jefferson Ave		Amount 68.40	
City Akron	State OH	Zip Code 44302-1046	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mary Bonner		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3878 W 36th St Down		Amount 68.40	
City Cleveland	State OH	Zip Code 44109-2716	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Mary Bonner		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3878 W 36th St Down		Amount 68.40	
City Cleveland	State OH	Zip Code 44109-2716	Transaction ID : VN7CZA35HM0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clifton Bostick		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4203 Hewitt St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2173	Transaction ID : VN7CZA370F9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clifton Bostick		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4203 Hewitt St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2173	Transaction ID : VN7CZA37111
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Clifton Bostick		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 4203 Hewitt St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2173	Transaction ID : VN7CZA372Q6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clifton Bostick		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 4203 Hewitt St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2173	Transaction ID : VN7CZA37398
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2701 Chester Ave		Amount 4.09	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA35JV8
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.69
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2701 Chester Ave		Amount 10.51	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA35JW6

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2701 Chester Ave		Amount 18.37	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA35JX4

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2701 Chester Ave		Amount 11.73	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA35JY2

(a) SUBTOTAL of Itemized Independent Expenditures.....	40.61
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2701 Chester Ave		Amount 4.09	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35K89	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2701 Chester Ave		Amount 10.51	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35K97	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2701 Chester Ave		Amount 18.37	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35KA5	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.97
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2701 Chester Ave		Amount 11.73	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA35KB3
Purpose of Expenditure Gas	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 22.80	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA36044
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 22.80	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA360X1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	57.33
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 22.80	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA36382
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 22.80	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA36401
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 4.25	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA36DX9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.85
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 4.25	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA36E78
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 4.00	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA36F55
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 4.00	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA36FF2
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.25
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Benjamin Britt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1424 Richmond Rd		Amount 68.40	
City Lyndhurst	State OH	Zip Code 44124-2460	Transaction ID : VN7CZA35GR9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Benjamin Britt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1424 Richmond Rd		Amount 68.40	
City Lyndhurst	State OH	Zip Code 44124-2460	Transaction ID : VN7CZA35J47
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haley Brock		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 7.13	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA360H6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	143.93
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Haley Brock		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 7.13	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA361A4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haley Brock		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 7.13	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA363M7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haley Brock		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 7.13	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA364C6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.39
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Dasent Brown		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1209 Majestic Palm Ct		Amount 34.20	
City Apopka	State FL	Zip Code 32712-2455	Transaction ID : VN7CZA36GK6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dasent Brown		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1209 Majestic Palm Ct		Amount 34.20	
City Apopka	State FL	Zip Code 32712-2455	Transaction ID : VN7CZA36J69
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.82	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36ST1
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	80.22
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 7.69	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36SV8
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 7.69	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36SW6
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 18.03	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36SX4
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.41
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.45	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36SY2
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.15	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36SZ0
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.82	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36T08
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	34.42
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 8.70	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36T16

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 8.89	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36T24

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.82	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36T32

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.41
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.82	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36T65
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 7.69	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36T73
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 7.69	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36T81
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 18.03	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36T99

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.45	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36TA7

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.15	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36TB5

(a) SUBTOTAL of Itemized Independent Expenditures.....	40.63
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.82	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36TC3
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 8.70	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36TD1
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 8.89	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36TE9
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.41
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.82	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36TF6
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.82	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36TJ0
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 7.69	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36TK8
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.33
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 7.69	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36TM6
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 18.03	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36TN4
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.45	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36TP2
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.17
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.15	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36TQ0
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.82	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36TR8
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 8.70	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36TS5
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.67
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 8.89	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Transaction ID : VN7CZA36TT3

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.82	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Transaction ID : VN7CZA36TV1

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.82	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Transaction ID : VN7CZA36TY5

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.53
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 7.69	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36TZ3
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 7.69	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36V01
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 18.03	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36V19
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.41
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.45	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36V27
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.15	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36V34
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.82	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA36V42
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	34.42
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 8.70	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36V50	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 8.89	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36V68	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 212 W 4th St		Amount 11.82	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36V76	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.41
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1 Belmont Ave		Amount 25.39	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35NF0

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.17	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35NG8

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.38	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35NH6

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.94
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1 Belmont Ave		Amount 23.53	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/Type	Transaction ID : VN7CZA35NJ4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		648181.85	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.38	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/Type	Transaction ID : VN7CZA35NK1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		648181.85	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1 Belmont Ave		Amount 25.39	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/Type	Transaction ID : VN7CZA35NP5
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		126851.89	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.30
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.17	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35NQ3	

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.38	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35NR1	

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1 Belmont Ave		Amount 23.53	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35NS9	

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.38	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Chicago		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3721 N Broadway St		Amount 25.25	
City Chicago	State IL	Zip Code 60613-4104	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Chicago		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3721 N Broadway St		Amount 25.25	
City Chicago	State IL	Zip Code 60613-4104	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.88
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 24.16	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35JJ7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35JK5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 22.80	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35JM3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.27
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35JN1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.19	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35JP9
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.84	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35JQ7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	78.34
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.09	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35JR5	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35JS2	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35JT0	

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.71
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 24.16	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35JZ0
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35K08
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 22.80	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35K16
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.27
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35K24
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.19	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35K31
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.84	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35K49
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	78.34
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.09	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35K57
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35K65
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA35K73
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.71
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Columbus		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1030 W 3rd Ave		Amount 25.14	
City Columbus	State OH	Zip Code 43212-3128	Transaction ID : VN7CZA35RC3
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Columbus		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1030 W 3rd Ave		Amount 25.14	
City Columbus	State OH	Zip Code 43212-3128	Transaction ID : VN7CZA35RP2
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA373R7
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	57.56
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA373S5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA373T3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA373V0
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA37400
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA37418
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA37426
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA37434
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA374R0
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA374S7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA374T5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA374V3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA37503
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA37511
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA37529
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA37536
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.03	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA36JW1
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.37	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA36JX9
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.03	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA36JY7
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.43
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 8.24	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36K02	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 8.24	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36K10	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.19	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36K28	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.67
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.03	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA36K36
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.32	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA36K44
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.03	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA36K52
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.38
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.37	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36K60	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.03	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36K78	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 8.24	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36K93	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.64
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 8.24	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA36KA1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.19	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA36KB9
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.03	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA36KC7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	34.46
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.32	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA36KD5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address Landside Terminal #4000		Amount 19.51	
City Pittsburgh	State PA	Zip Code 15231	Transaction ID : VN7CZA35Z01
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 15.18	
City Pittsburgh	State PA	Zip Code 15222-1417	Transaction ID : VN7CZA35Z19
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	48.01
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 15.45	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA35Z27
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 15.45	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA35Z35
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 16.41	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA35Z43
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	47.31
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 15.45	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35Z51

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 15.45	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35Z69

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address Landside Terminal #4000		Amount 9.90	
City Pittsburgh	State PA	Zip Code 15231	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35Z77

(a) SUBTOTAL of Itemized Independent Expenditures.....	40.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 7.71	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA35Z85
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 7.84	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA35Z92
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 7.84	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA35ZA0
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	23.39
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 8.33	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35ZB8

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 7.84	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35ZC6

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 7.84	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35ZD4

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	24.01
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address Landside Terminal #4000		Amount 10.78	
City Pittsburgh	State PA	Zip Code 15231	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35ZE2	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 8.39	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35ZF0	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 8.53	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35ZG8	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.70
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 8.53	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA35ZH6
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One:	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 9.06	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA35ZJ4
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One:	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 8.53	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA35ZK1
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One:	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	26.12
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 8.53	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35ZM9

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address Landside Terminal #4000		Amount 20.39	
City Pittsburgh	State PA	Zip Code 15231	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35ZN7

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 15.86	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35ZP5

(a) SUBTOTAL of Itemized Independent Expenditures.....	44.78
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 16.14	
City Pittsburgh	State PA	Zip Code 15222-1417	Transaction ID : VN7CZA35ZQ3
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 16.14	
City Pittsburgh	State PA	Zip Code 15222-1417	Transaction ID : VN7CZA35ZR9
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 17.15	
City Pittsburgh	State PA	Zip Code 15222-1417	Transaction ID : VN7CZA35ZS7
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.43
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 16.14	
City Pittsburgh	State PA	Zip Code 15222-1417	Transaction ID : VN7CZA35ZT5
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 625 Stanwix St		Amount 16.14	
City Pittsburgh	State PA	Zip Code 15222-1417	Transaction ID : VN7CZA35ZV3
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.15	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA364G8
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.43
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 3.06	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA364H6
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 3.06	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA364J4
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.06	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA364K1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	13.18
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.15	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36621	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 3.06	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36639	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 3.06	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36647	

(a) SUBTOTAL of Itemized Independent Expenditures.....	13.27
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.06	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36654

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.73	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA36AR3

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.88	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA36AS1

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.67
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.88	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36AT9	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.65	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36AV6	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.73	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36CA6	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.26
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.88	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA36CB4
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.88	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA36CC2
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.65	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA36CD9
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.41
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA36XD7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA36XR4
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA36YS5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.76
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36Z40

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 18.25	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35RD0

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 24.94	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35RE8

(a) SUBTOTAL of Itemized Independent Expenditures.....	50.11
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 24.86	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA35RF6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 15.75	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA35RG4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 24.86	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA35RH2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	65.47
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 18.25	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35RQ9

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 24.94	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35RR7

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 24.86	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35RS5

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.05
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 15.75	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35RT3	

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 24.86	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35RV1	

Full Name (Last, First, Middle Initial) of Payee Tyree Bullock		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 607 Homeland Ave		Amount 22.80	
City Durham	State NC	Zip Code 27707-4020	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA360D5	

(a) SUBTOTAL of Itemized Independent Expenditures.....	63.41
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tyree Bullock		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 607 Homeland Ave		Amount 22.80	
City Durham	State NC	Zip Code 27707-4020	Transaction ID : VN7CZA36162
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Tyree Bullock		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 607 Homeland Ave		Amount 22.80	
City Durham	State NC	Zip Code 27707-4020	Transaction ID : VN7CZA363G5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Tyree Bullock		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 607 Homeland Ave		Amount 22.80	
City Durham	State NC	Zip Code 27707-4020	Transaction ID : VN7CZA36485
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jeffery Burton		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1443 Matador Dr		Amount 47.06	
City Gotha	State FL	Zip Code 34734-4552	Transaction ID : VN7CZA36FR3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jeffery Burton		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1443 Matador Dr		Amount 47.06	
City Gotha	State FL	Zip Code 34734-4552	Transaction ID : VN7CZA36HB6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Philip Butler		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 22.80	
City Carrboro	State NC	Zip Code 27510-1837	Transaction ID : VN7CZA360E3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	116.92
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Philip Butler		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 22.80	
City Carrboro	State NC	Zip Code 27510-1837	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Philip Butler		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 22.80	
City Carrboro	State NC	Zip Code 27510-1837	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Philip Butler		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 22.80	
City Carrboro	State NC	Zip Code 27510-1837	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Samir Butt		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 737 Melon Ter Apt B		Amount 68.40	
City Philadelphia	State PA	Zip Code 19123-3428	Transaction ID : VN7CZA35KN2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Samir Butt		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 737 Melon Ter Apt B		Amount 68.40	
City Philadelphia	State PA	Zip Code 19123-3428	Transaction ID : VN7CZA35MP2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rashawn Byrd		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA36MH9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Rashawn Byrd		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA36P32
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rashawn Byrd		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA36QN7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rashawn Byrd		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA36S70
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Micah Callaway		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36M21
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Micah Callaway		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36NM4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Micah Callaway		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36Q69
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Micah Callaway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36RR2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lorenzo Campbell		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36N32
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lorenzo Campbell		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36PN5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	55.58
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Lorenzo Campbell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36R70
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lorenzo Campbell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36SS3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA36XG1
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.78
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA36XJ7
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA36XK4
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA36XM2
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36XV8

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36XX3

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36XY1

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA36XZ9
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA36YW8
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA36YY4
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA36YZ2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA36Z08
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA36Z73
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA36Z99
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA36ZA7
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 12.40	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA36ZB5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.90	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA364M9
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.90	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA364N7
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.91	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA364P5
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.71
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.90	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA364Q3
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.90	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA364R1
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.90	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA364S9
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.70
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.89	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA364T7
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.89	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA364V5
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 10.03	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA364W3
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.81
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 10.03	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA364X0
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.90	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA36662
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.90	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA36670
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.83
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.91	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA36688
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.90	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA36696
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.90	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA366A4
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.71
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.90	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA366B2
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.89	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA366C0
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.89	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA366D8
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.68
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 10.03	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA366E6
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 10.03	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA366F3
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA36AW4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.37
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA36AX2
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.33	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA36AY0
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA36AZ8
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.95
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA36B06
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA36B14
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA36B22
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.93
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA36B30
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.44	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA36B48
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.44	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA36B55
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.19
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA36CE7
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA36CF5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.33	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA36CG3
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.95
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA36CH1
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA36CJ9
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA36CK7
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.93
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	
Transaction ID : VN7CZA36CM5			
Purpose of Expenditure Lodging	Category/ Type	Office Sought:	<input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.31	
City Durham	State NC	Zip Code 27713	
Transaction ID : VN7CZA36CN3			
Purpose of Expenditure Lodging	Category/ Type	Office Sought:	<input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.44	
City Durham	State NC	Zip Code 27713	
Transaction ID : VN7CZA36CP1			
Purpose of Expenditure Lodging	Category/ Type	Office Sought:	<input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.06
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1818 NC-54		Amount 9.44	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36CQ8

Full Name (Last, First, Middle Initial) of Payee Capitol Square Printing		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 59 E Gay St		Amount 147.97	
City Columbus	State OH	Zip Code 43215-3103	
Purpose of Expenditure Printing		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35S01

Full Name (Last, First, Middle Initial) of Payee Capitol Square Printing		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 59 E Gay St		Amount 147.97	
City Columbus	State OH	Zip Code 43215-3103	
Purpose of Expenditure Printing		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35S18

(a) SUBTOTAL of Itemized Independent Expenditures.....	305.38
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Capitol Square Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 59 E Gay St		Amount 147.97	
City Columbus	State OH	Zip Code 43215-3103	Transaction ID : VN7CZA35S26
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Full Name (Last, First, Middle Initial) of Payee Capitol Square Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 59 E Gay St		Amount 147.97	
City Columbus	State OH	Zip Code 43215-3103	Transaction ID : VN7CZA35S34
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36MF4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	330.14
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36P17
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36QK2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36S55
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee John Carlino		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3729 E 53rd St		Amount 68.40	
City Cleveland	State OH	Zip Code 44105-1118	Transaction ID : VN7CZA35G59
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Carlino		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3729 E 53rd St		Amount 68.40	
City Cleveland	State OH	Zip Code 44105-1118	Transaction ID : VN7CZA35HH6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kelly Casey		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 701 Arlington St		Amount 47.06	
City Orlando	State FL	Zip Code 32805-1413	Transaction ID : VN7CZA36GF4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	183.86
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kelly Casey		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 701 Arlington St		Amount 47.06	
City Orlando	State FL	Zip Code 32805-1413	Transaction ID : VN7CZA36J27
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nolan Champer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 66 E Maynard Ave		Amount 72.96	
City Columbus	State OH	Zip Code 43202-2941	Transaction ID : VN7CZA35PQ4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nolan Champer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 66 E Maynard Ave		Amount 72.96	
City Columbus	State OH	Zip Code 43202-2941	Transaction ID : VN7CZA35QX4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	192.98
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee LeEarl Chapman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1769 Channingway Ct W		Amount 21.38	
City Columbus	State OH	Zip Code 43232-3106	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35Q39
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

Full Name (Last, First, Middle Initial) of Payee LeEarl Chapman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1769 Channingway Ct W		Amount 21.38	
City Columbus	State OH	Zip Code 43232-3106	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35R99
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

Full Name (Last, First, Middle Initial) of Payee Lena Cheney		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 99 Corbett Ct Apt 218		Amount 39.90	
City Pittsburgh	State PA	Zip Code 15237-3028	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35VB9
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

(a) SUBTOTAL of Itemized Independent Expenditures.....	82.66
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Lena Cheney		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 99 Corbett Ct Apt 218		Amount 19.95	
City Pittsburgh	State PA	Zip Code 15237-3028	Transaction ID : VN7CZA35WE6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Lena Cheney		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 99 Corbett Ct Apt 218		Amount 19.95	
City Pittsburgh	State PA	Zip Code 15237-3028	Transaction ID : VN7CZA35XG2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee Lena Cheney		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 99 Corbett Ct Apt 218		Amount 39.90	
City Pittsburgh	State PA	Zip Code 15237-3028	Transaction ID : VN7CZA35YJ1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 94.17	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35KJ8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 94.17	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35MK9
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 12.50	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA35NX0
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	200.84
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 12.50	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35N26

Full Name (Last, First, Middle Initial) of Payee Reginald Cherubin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1126 Anchor St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1115	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35M82

Full Name (Last, First, Middle Initial) of Payee Reginald Cherubin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1126 Anchor St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1115	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35N92

(a) SUBTOTAL of Itemized Independent Expenditures.....	149.30
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Charles Childers		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 54 N Ogden Ave		Amount 79.25	
City Columbus	State OH	Zip Code 43204-3310	Transaction ID : VN7CZA35PR2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Charles Childers		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 54 N Ogden Ave		Amount 79.25	
City Columbus	State OH	Zip Code 43204-3310	Transaction ID : VN7CZA35QY2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Leron Clardy		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36KS0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	192.70
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Leron Clardy		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Leron Clardy		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Leron Clardy		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 22.80	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA36093
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 22.80	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA36121
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 22.80	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA363D1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 22.80	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA36451
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 4.25	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA36E36
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 4.25	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA36ED5
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.30
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 4.00	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA36FB2
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 4.00	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA36FN9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Deborah Clark		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 5410 Vista View Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27612-8710	Transaction ID : VN7CZA36VA0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		33651.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	30.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Deborah Clark		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5410 Vista View Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27612-8710	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36VN7
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Full Name (Last, First, Middle Initial) of Payee Deborah Clark		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5410 Vista View Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27612-8710	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36WP5
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Deborah Clark		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5410 Vista View Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27612-8710	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36X12
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Corneilius Coachman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2120 Stryker St		Amount 34.20	
City Orlando	State FL	Zip Code 32805-1215	Transaction ID : VN7CZA36FZ8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Corneilius Coachman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2120 Stryker St		Amount 34.20	
City Orlando	State FL	Zip Code 32805-1215	Transaction ID : VN7CZA36HJ1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Portia Cochrum		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36M63
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Portia Cochrum		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36NR6

Full Name (Last, First, Middle Initial) of Payee Portia Cochrum		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36QA1

Full Name (Last, First, Middle Initial) of Payee Portia Cochrum		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36RW4

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Justin Cole		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA370X0
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		33651.35	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Justin Cole		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA371F2
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		33651.35	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Justin Cole		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA37357
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		648181.85	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Justin Cole		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA373Q9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Malcolm Collins		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 336 Eddy Rd Apt 12		Amount 68.40	
City Cleveland	State OH	Zip Code 44108-1638	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35GS7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Malcolm Collins		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 336 Eddy Rd Apt 12		Amount 68.40	
City Cleveland	State OH	Zip Code 44108-1638	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35J54
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 434889.86		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	159.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ryan Cook		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7029 Talbot Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32819-7440	Transaction ID : VN7CZA36H82
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ryan Cook		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7029 Talbot Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32819-7440	Transaction ID : VN7CZA36JT5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Terry Coplin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4802 SW 134th Loop		Amount 34.20	
City Ocala	State FL	Zip Code 34473-5270	Transaction ID : VN7CZA36GX5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Terry Coplin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4802 SW 134th Loop		Amount 34.20	
City Ocala	State FL	Zip Code 34473-5270	Transaction ID : VN7CZA36JF0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Isaac Cowan-Page		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2130 Vantine St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15221-1138	Transaction ID : VN7CZA35TY6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Isaac Cowan-Page		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2130 Vantine St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15221-1138	Transaction ID : VN7CZA35W13
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Isaac Cowan-Page		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2130 Vantine St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15221-1138	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Isaac Cowan-Page		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2130 Vantine St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15221-1138	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brittany Cox		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Brittany Cox		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36PK9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brittany Cox		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36R54
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brittany Cox		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36SQ7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Samuel Craig		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 904 3rd St		Amount 45.60	
City Mc Kees Rocks	State PA	Zip Code 15136-3443	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35VG9
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Samuel Craig		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 904 3rd St		Amount 22.80	
City Mc Kees Rocks	State PA	Zip Code 15136-3443	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35WK5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Samuel Craig		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 904 3rd St		Amount 22.80	
City Mc Kees Rocks	State PA	Zip Code 15136-3443	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35XN2
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Samuel Craig		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 904 3rd St		Amount 45.60	
City Mc Kees Rocks	State PA	Zip Code 15136-3443	Transaction ID : VN7CZA35YQ0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Orlando Crittenten		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36MW6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Orlando Crittenten		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36PE9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Orlando Crittenten		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36R04
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Orlando Crittenten		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36SJ7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee VierShaun Curry		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2224 Hamilton Ave.		Amount 68.40	
City Whitehall	State OH	Zip Code 43213	Transaction ID : VN7CZA35Q05
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee VierShaun Curry		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2224 Hamilton Ave.		Amount 68.40	
City Whitehall	State OH	Zip Code 43213	Transaction ID : VN7CZA35R65
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Full Name (Last, First, Middle Initial) of Payee Jude Daceus		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2562 Cinderlane Parkway		Amount 34.20	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA36GV9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		5628.98	

Full Name (Last, First, Middle Initial) of Payee Jude Daceus		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2562 Cinderlane Parkway		Amount 34.20	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA36JE2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Theresa Daniel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7209 S Orange Blossom Trl		Amount 34.20	
City Orlando	State FL	Zip Code 32809-5718	Transaction ID : VN7CZA36GD9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Theresa Daniel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7209 S Orange Blossom Trl		Amount 34.20	
City Orlando	State FL	Zip Code 32809-5718	Transaction ID : VN7CZA36J02
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Scott Davidson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 10588 Septney Ave NW		Amount 68.40	
City Uniontown	State OH	Zip Code 44685	Transaction ID : VN7CZA35GB6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Scott Davidson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 10588 Septney Ave NW		Amount 68.40	
City Uniontown	State OH	Zip Code 44685	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35HQ4	

Full Name (Last, First, Middle Initial) of Payee Laurel Davis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36M55	

Full Name (Last, First, Middle Initial) of Payee Laurel Davis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36NQ8	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Laurel Davis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36Q93	

Full Name (Last, First, Middle Initial) of Payee Laurel Davis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36RV6	

Full Name (Last, First, Middle Initial) of Payee Cory Dawson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3878 W 36th St Down		Amount 68.40	
City Cleveland	State OH	Zip Code 44109-2716	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35G27	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Cory Dawson		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 3878 W 36th St Down		Amount 68.40	
City Cleveland	State OH	Zip Code 44109-2716	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35HE3

Full Name (Last, First, Middle Initial) of Payee Miranda Dean		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 40 Rowland Ave		Amount 89.16	
City Delaware	State OH	Zip Code 43015-2313	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35P38

Full Name (Last, First, Middle Initial) of Payee Miranda Dean		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 40 Rowland Ave		Amount 89.16	
City Delaware	State OH	Zip Code 43015-2313	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35Q96

(a) SUBTOTAL of Itemized Independent Expenditures.....	246.72
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Joseph Debow		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 471 Clearview Dr Apt 6		Amount 68.40	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA35GN5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joseph Debow		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 471 Clearview Dr Apt 6		Amount 68.40	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA35J13
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tabitha Diaz		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6101 Metrowest Blvd Apt 103		Amount 34.20	
City Orlando	State FL	Zip Code 32835-2954	Transaction ID : VN7CZA36H32
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tabitha Diaz		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6101 Metrowest Blvd Apt 103		Amount 34.20	
City Orlando	State FL	Zip Code 32835-2954	Transaction ID : VN7CZA36JN5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36KP6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36N81
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	128.36
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA36PT4
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 434889.86		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA36RC9
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 434889.86		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Anthony Dotson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA36MB2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	128.36
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Anthony Dotson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36NX5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		648181.85	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Anthony Dotson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36QF0
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		434889.86	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Anthony Dotson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36S13
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		434889.86	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kellen Duckery		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6758 Chew Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-1918	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35M74

Full Name (Last, First, Middle Initial) of Payee Kellen Duckery		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6758 Chew Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-1918	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35N85

Full Name (Last, First, Middle Initial) of Payee Kevin Duncan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 105 S Watt St		Amount 68.40	
City Chillicothe	State OH	Zip Code 45601-3570	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35P54

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kevin Duncan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 105 S Watt St		Amount 68.40	
City Chillicothe	State OH	Zip Code 45601-3570	Transaction ID : VN7CZA35QB2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Full Name (Last, First, Middle Initial) of Payee Theresa Dunn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1377 Genessee Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43211-1434	Transaction ID : VN7CZA35PN8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Theresa Dunn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1377 Genessee Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43211-1434	Transaction ID : VN7CZA35QV8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA36028
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA360V5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA36366
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA363Y6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Danielle Earl		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2006 E Main St		Amount 22.80	
City Durham	State NC	Zip Code 27703-3220	Transaction ID : VN7CZA36052
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Danielle Earl		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2006 E Main St		Amount 22.80	
City Durham	State NC	Zip Code 27703-3220	Transaction ID : VN7CZA360Y9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Danielle Earl		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2006 E Main St		Amount 22.80	
City Durham	State NC	Zip Code 27703-3220	Transaction ID : VN7CZA36390
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Danielle Earl		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2006 E Main St		Amount 22.80	
City Durham	State NC	Zip Code 27703-3220	Transaction ID : VN7CZA36419
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kimberly Early		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1968	Transaction ID : VN7CZA36MX4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	92.68
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kimberly Early		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1968	Transaction ID : VN7CZA36PF7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kimberly Early		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1968	Transaction ID : VN7CZA36R12
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kimberly Early		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1968	Transaction ID : VN7CZA36SK5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.24
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Felicia Echols		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2824 N Judson St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-2016	Transaction ID : VN7CZA35M66
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Felicia Echols		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2824 N Judson St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-2016	Transaction ID : VN7CZA35N77
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4714 Lee Ave		Amount 22.80	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA35ZW1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	159.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4714 Lee Ave		Amount 22.80	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA360N8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 33651.35			

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4714 Lee Ave		Amount 22.80	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA36309
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 648181.85			

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4714 Lee Ave		Amount 22.80	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA363R8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 648181.85			

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.25	
City Saint Louis	State MO	Zip Code 63115-2108	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36DY7

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.25	
City Saint Louis	State MO	Zip Code 63115-2108	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36E86

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.00	
City Saint Louis	State MO	Zip Code 63115-2108	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36F63

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.00	
City Saint Louis	State MO	Zip Code 63115-2108	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36FG0

Full Name (Last, First, Middle Initial) of Payee Ruari Egan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 216 S Saint Clair St Apt 1		Amount 59.44	
City Pittsburgh	State PA	Zip Code 15206-3655	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35TQ1

Full Name (Last, First, Middle Initial) of Payee Ruari Egan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 216 S Saint Clair St Apt 1		Amount 29.72	
City Pittsburgh	State PA	Zip Code 15206-3655	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35VT8

(a) SUBTOTAL of Itemized Independent Expenditures.....	93.16
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ruari Egan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 216 S Saint Clair St Apt 1		Amount 29.72	
City Pittsburgh	State PA	Zip Code 15206-3655	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ruari Egan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 216 S Saint Clair St Apt 1		Amount 59.44	
City Pittsburgh	State PA	Zip Code 15206-3655	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jacob Ehrlich		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 406 Kent Dr		Amount 22.80	
City Cary	State NC	Zip Code 27511-3105	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	111.96
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jacob Ehrlich		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 406 Kent Dr		Amount 22.80	
City Cary	State NC	Zip Code 27511-3105	Transaction ID : VN7CZA36VY6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jacob Ehrlich		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 406 Kent Dr		Amount 22.80	
City Cary	State NC	Zip Code 27511-3105	Transaction ID : VN7CZA36WZ6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jacob Ehrlich		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 406 Kent Dr		Amount 22.80	
City Cary	State NC	Zip Code 27511-3105	Transaction ID : VN7CZA36XA3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Abdallah El Hamawi		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 47.06	
City Orlando	State FL	Zip Code 32828-8216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA36GQ8
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Abdallah El Hamawi		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 47.06	
City Orlando	State FL	Zip Code 32828-8216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA36JA1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Youssef El Hamawi		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 34.20	
City Orlando	State FL	Zip Code 32828-8216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA36G48
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	128.32
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Youssef El Hamawi		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 34.20	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA36HQ0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mulai El		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3510 Mantua Avwe		Amount 68.40	
City Philadelphia	State PA	Zip Code 19104	Transaction ID : VN7CZA35KG2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mulai El		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3510 Mantua Avwe		Amount 68.40	
City Philadelphia	State PA	Zip Code 19104	Transaction ID : VN7CZA35MH3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kyle Euype		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1222 W Clifton Blvd		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1053	Transaction ID : VN7CZA35GY6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kyle Euype		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1222 W Clifton Blvd		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1053	Transaction ID : VN7CZA35JA4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jashala Evans		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA36060
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	159.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jashala Evans		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA360Z7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jashala Evans		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA363A8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jashala Evans		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA36427
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Bridget Fawcett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5038 Gilbert Rd		Amount 76.38	
City Centerburg	State OH	Zip Code 43011-9495	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Bridget Fawcett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5038 Gilbert Rd		Amount 76.38	
City Centerburg	State OH	Zip Code 43011-9495	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ashley Feist		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2203 Sauer Ave		Amount 39.65	
City Cincinnati	State OH	Zip Code 45219-1436	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	192.41
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ashley Feist		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2203 Sauer Ave		Amount 39.65	
City Cincinnati	State OH	Zip Code 45219-1436	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36N57

Full Name (Last, First, Middle Initial) of Payee Ashley Feist		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2203 Sauer Ave		Amount 39.65	
City Cincinnati	State OH	Zip Code 45219-1436	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36PQ0

Full Name (Last, First, Middle Initial) of Payee Ashley Feist		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2203 Sauer Ave		Amount 39.65	
City Cincinnati	State OH	Zip Code 45219-1436	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36R95

(a) SUBTOTAL of Itemized Independent Expenditures.....	118.95
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shawn Fennell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1512 Superior Ave		Amount 14.25	
City Pittsburgh	State PA	Zip Code 15212-2726	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35VR2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Shawn Fennell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1512 Superior Ave		Amount 7.13	
City Pittsburgh	State PA	Zip Code 15212-2726	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35WV6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Shawn Fennell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1512 Superior Ave		Amount 7.13	
City Pittsburgh	State PA	Zip Code 15212-2726	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35XX5
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shawn Fennell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1512 Superior Ave		Amount 14.25	
City Pittsburgh	State PA	Zip Code 15212-2726	Transaction ID : VN7CZA35YZ3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ishay Ferguson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1283 E Long St		Amount 21.38	
City Columbus	State OH	Zip Code 43203-1944	Transaction ID : VN7CZA35Q47
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ishay Ferguson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1283 E Long St		Amount 21.38	
City Columbus	State OH	Zip Code 43203-1944	Transaction ID : VN7CZA35RA7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	57.01
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jennifer Fidele		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4302 Meadowbrook Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32808-2136	Transaction ID : VN7CZA36G06
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		5628.98	

Full Name (Last, First, Middle Initial) of Payee Jennifer Fidele		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4302 Meadowbrook Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32808-2136	Transaction ID : VN7CZA36HK9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee John Finn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1518 Oakwood Dr		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15234-1012	Transaction ID : VN7CZA35V44
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee John Finn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1518 Oakwood Dr		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15234-1012	Transaction ID : VN7CZA35W70
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Finn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1518 Oakwood Dr		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15234-1012	Transaction ID : VN7CZA35X97
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Finn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1518 Oakwood Dr		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15234-1012	Transaction ID : VN7CZA35YB5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jordan Fortson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 301 3rd Ave # 712		Amount 14.25	
City Pittsburgh	State PA	Zip Code 15222-1924	Transaction ID : VN7CZA35VP6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jordan Fortson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 301 3rd Ave # 712		Amount 7.13	
City Pittsburgh	State PA	Zip Code 15222-1924	Transaction ID : VN7CZA35WS0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jordan Fortson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 301 3rd Ave # 712		Amount 7.13	
City Pittsburgh	State PA	Zip Code 15222-1924	Transaction ID : VN7CZA35XV9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jordan Fortson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 301 3rd Ave # 712		Amount 14.25	
City Pittsburgh	State PA	Zip Code 15222-1924	Transaction ID : VN7CZA35YX8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 26.42	
City Seattle	State WA	Zip Code 98105-1745	Transaction ID : VN7CZA370M9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 26.42	
City Seattle	State WA	Zip Code 98105-1745	Transaction ID : VN7CZA37161
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	67.09
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 26.42	
City Seattle	State WA	Zip Code 98105-1745	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA372W6

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 26.42	
City Seattle	State WA	Zip Code 98105-1745	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA373E8

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.17	
City Seattle	State WA	Zip Code 98105-1745	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA37592

(a) SUBTOTAL of Itemized Independent Expenditures.....	57.01
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.17	
City Seattle	State WA	Zip Code 98105-1745	Transaction ID : VN7CZA375C6
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.17	
City Seattle	State WA	Zip Code 98105-1745	Transaction ID : VN7CZA375N7
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.17	
City Seattle	State WA	Zip Code 98105-1745	Transaction ID : VN7CZA375R0
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tahira Fuentes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA370V4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tahira Fuentes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA371D6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tahira Fuentes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA37331
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tahira Fuentes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	
Purpose of Expenditure Salary and Benefits		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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA373N3

Full Name (Last, First, Middle Initial) of Payee Deanna Garrett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 47.08	
City Fort Thomas	State KY	Zip Code 41075-2520	
Purpose of Expenditure Salary and Benefits		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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36KN8

Full Name (Last, First, Middle Initial) of Payee Deanna Garrett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 47.08	
City Fort Thomas	State KY	Zip Code 41075-2520	
Purpose of Expenditure Salary and Benefits		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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36N73

(a) SUBTOTAL of Itemized Independent Expenditures.....	116.96
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Deanna Garrett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 47.08	
City Fort Thomas	State KY	Zip Code 41075-2520	Transaction ID : VN7CZA36PS6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Deanna Garrett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 47.08	
City Fort Thomas	State KY	Zip Code 41075-2520	Transaction ID : VN7CZA36RB1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA36KR2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	128.36
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA36NA7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA36PW0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA36RE5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jennifer Geddis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1101 Willowedge Ct		Amount 22.80	
City Knightdale	State NC	Zip Code 27545-8673	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36VF9

Full Name (Last, First, Middle Initial) of Payee Jennifer Geddis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1101 Willowedge Ct		Amount 22.80	
City Knightdale	State NC	Zip Code 27545-8673	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36VT6

Full Name (Last, First, Middle Initial) of Payee Jennifer Geddis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1101 Willowedge Ct		Amount 22.80	
City Knightdale	State NC	Zip Code 27545-8673	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA36WV5

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jennifer Geddis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1101 Willowedge Ct		Amount 22.80	
City Knightdale	State NC	Zip Code 27545-8673	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36X62

Full Name (Last, First, Middle Initial) of Payee Chris Gentilviso		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 815 16th St NW		Amount 49.33	
City Washington	State DC	Zip Code 20006-4101	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35EC1

Full Name (Last, First, Middle Initial) of Payee Chris Gentilviso		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 815 16th St NW		Amount 4.93	
City Washington	State DC	Zip Code 20006-4101	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35PT8

(a) SUBTOTAL of Itemized Independent Expenditures.....	77.06
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Chris Gentilviso		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 815 16th St NW		Amount 4.93	
City Washington	State DC	Zip Code 20006-4101	Transaction ID : VN7CZA35R08
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

Full Name (Last, First, Middle Initial) of Payee Chris Gentilviso		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 815 16th St NW		Amount 4.93	
City Washington	State DC	Zip Code 20006-4101	Transaction ID : VN7CZA35TT5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee Chris Gentilviso		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 815 16th St NW		Amount 4.93	
City Washington	State DC	Zip Code 20006-4101	Transaction ID : VN7CZA35VX1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

(a) SUBTOTAL of Itemized Independent Expenditures.....	14.79
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Chris Gentilviso		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 815 16th St NW		Amount 4.93	
City Washington	State DC	Zip Code 20006-4101	Transaction ID : VN7CZA360A1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chris Gentilviso		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 815 16th St NW		Amount 4.93	
City Washington	State DC	Zip Code 20006-4101	Transaction ID : VN7CZA36139
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chris Gentilviso		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 815 16th St NW		Amount 4.93	
City Washington	State DC	Zip Code 20006-4101	Transaction ID : VN7CZA36GW7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	14.79
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Chris Gentilviso		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 815 16th St NW		Amount 4.93	
City Washington	State DC	Zip Code 20006-4101	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36HA8

Full Name (Last, First, Middle Initial) of Payee Temeisha Gibson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2202 Jones Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4920	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA370E1

Full Name (Last, First, Middle Initial) of Payee Temeisha Gibson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2202 Jones Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4920	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA37104

(a) SUBTOTAL of Itemized Independent Expenditures.....	50.53
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Temeisha Gibson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2202 Jones Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4920	Transaction ID : VN7CZA372P8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Temeisha Gibson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2202 Jones Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4920	Transaction ID : VN7CZA37380
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 134 W 107th St		Amount 22.80	
City Chicago	State IL	Zip Code 60628-3437	Transaction ID : VN7CZA36010
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 134 W 107th St		Amount 22.80	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA360T8
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 134 W 107th St		Amount 22.80	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36358
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 134 W 107th St		Amount 22.80	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA363X8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 134 W 107th St		Amount 4.25	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA36E10
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 134 W 107th St		Amount 4.25	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA36EB9
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 134 W 107th St		Amount 4.00	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA36F96
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 134 W 107th St		Amount 4.00	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36FK3

Full Name (Last, First, Middle Initial) of Payee Detiste Gilmer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 115 McCormick St.		Amount 22.80	
City Greensboro	State NC	Zip Code 27403	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA370K1

Full Name (Last, First, Middle Initial) of Payee Detiste Gilmer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 115 McCormick St.		Amount 22.80	
City Greensboro	State NC	Zip Code 27403	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA37153

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Detiste Gilmer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 115 McCormick St.		Amount 22.80	
City Greensboro	State NC	Zip Code 27403	Transaction ID : VN7CZA372V8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Detiste Gilmer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 115 McCormick St.		Amount 22.80	
City Greensboro	State NC	Zip Code 27403	Transaction ID : VN7CZA373D0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Farrah Gilot		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6675 Perimeter Dr.		Amount 14.25	
City Columbus	State OH	Zip Code 43228	Transaction ID : VN7CZA35VQ4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	59.85
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Farrah Gilot		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6675 Perimeter Dr.		Amount 7.13	
City Columbus	State OH	Zip Code 43228	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35WT8

Full Name (Last, First, Middle Initial) of Payee Farrah Gilot		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6675 Perimeter Dr.		Amount 7.13	
City Columbus	State OH	Zip Code 43228	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35XW7

Full Name (Last, First, Middle Initial) of Payee Farrah Gilot		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6675 Perimeter Dr.		Amount 14.25	
City Columbus	State OH	Zip Code 43228	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35YY6

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Alyssa Goidich		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 7.13	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA360M0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Alyssa Goidich		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 7.13	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA361D8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Alyssa Goidich		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 7.13	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA363Q0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	21.39
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Alyssa Goidich		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 7.13	
City Fayetteville	State NC	Zip Code 28306-7901	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA364F0

Full Name (Last, First, Middle Initial) of Payee Aqueelah Goins		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1647 Elsinore Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44112-3815	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35GE0

Full Name (Last, First, Middle Initial) of Payee Aqueelah Goins		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1647 Elsinore Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44112-3815	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35HT8

(a) SUBTOTAL of Itemized Independent Expenditures.....	143.93
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee James Gouine		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3242 Tumwater Valley Dr		Amount 68.40	
City Pickerington	State OH	Zip Code 43147-9831	Transaction ID : VN7CZA35P62
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee James Gouine		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3242 Tumwater Valley Dr		Amount 68.40	
City Pickerington	State OH	Zip Code 43147-9831	Transaction ID : VN7CZA35QC0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rose Greene		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 417 Moline St		Amount 22.80	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA35ZZ4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	159.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Rose Greene		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 417 Moline St		Amount 22.80	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA360R2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rose Greene		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 417 Moline St		Amount 22.80	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA36332
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rose Greene		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 417 Moline St		Amount 22.80	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA363V2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee William Greene		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 36 E Montana St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-2210	Transaction ID : VN7CZA35KH0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee William Greene		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 36 E Montana St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-2210	Transaction ID : VN7CZA35MJ1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee John Griffith		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5389 Shannon Ln		Amount 68.40	
City Columbus	State OH	Zip Code 43235-7294	Transaction ID : VN7CZA35PG9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee John Griffith		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5389 Shannon Ln		Amount 68.40	
City Columbus	State OH	Zip Code 43235-7294	Transaction ID : VN7CZA35QP9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA36036
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA360W3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA36374
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA363Z3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nicholas Grubbs		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36KT8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nicholas Grubbs		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36NC3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nicholas Grubbs		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36PY6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nicholas Grubbs		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36RG1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ian Haffling		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 917 McCandless Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15201-2451	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35V93
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ian Haffling		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 917 McCandless Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15201-2451	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35WC0
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ian Haffling		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 917 McCandless Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15201-2451	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35XE6
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ian Haffling		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 917 McCandless Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15201-2451	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35YG5	

Full Name (Last, First, Middle Initial) of Payee Allen Hafford		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36KZ7	

Full Name (Last, First, Middle Initial) of Payee Allen Hafford		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36NH2	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Allen Hafford		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36Q35
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Allen Hafford		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36RN0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Conrad Hampton		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3461 Shadeland Ave		Amount 59.44	
City Pittsburgh	State PA	Zip Code 15212-2253	Transaction ID : VN7CZA35VK2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	127.84
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Conrad Hampton		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3461 Shadeland Ave		Amount 29.72	
City Pittsburgh	State PA	Zip Code 15212-2253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35WP7
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Conrad Hampton		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3461 Shadeland Ave		Amount 29.72	
City Pittsburgh	State PA	Zip Code 15212-2253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35XR5
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Conrad Hampton		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3461 Shadeland Ave		Amount 59.44	
City Pittsburgh	State PA	Zip Code 15212-2253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35YT4
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	118.88
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Margaret Hane		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 59.44	
City Pittsburgh	State PA	Zip Code 15224-1953	Transaction ID : VN7CZA35VM0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Margaret Hane		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 29.72	
City Pittsburgh	State PA	Zip Code 15224-1953	Transaction ID : VN7CZA35WQ5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Margaret Hane		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 29.72	
City Pittsburgh	State PA	Zip Code 15224-1953	Transaction ID : VN7CZA35XS3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

(a) SUBTOTAL of Itemized Independent Expenditures.....	118.88
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Margaret Hane		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 59.44	
City Pittsburgh	State PA	Zip Code 15224-1953	Transaction ID : VN7CZA35YV2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee Carolyn Happer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2815 Briar Park Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32833-5521	Transaction ID : VN7CZA36G97
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		5628.98	

Full Name (Last, First, Middle Initial) of Payee Carolyn Happer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2815 Briar Park Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32833-5521	Transaction ID : VN7CZA36HW0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	127.84
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Beenah Harrell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36MP9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Beenah Harrell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36P82
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Beenah Harrell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36QT7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Beenah Harrell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36SC0	

Full Name (Last, First, Middle Initial) of Payee Tyler Harris		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2437 Robertson Ave		Amount 41.04	
City Cincinnati	State OH	Zip Code 45212-3410	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36MZ0	

Full Name (Last, First, Middle Initial) of Payee Tyler Harris		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2437 Robertson Ave		Amount 41.04	
City Cincinnati	State OH	Zip Code 45212-3410	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36PH3	

(a) SUBTOTAL of Itemized Independent Expenditures.....	116.28
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tyler Harris		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2437 Robertson Ave		Amount 41.04	
City Cincinnati	State OH	Zip Code 45212-3410	Transaction ID : VN7CZA36R38
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tyler Harris		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2437 Robertson Ave		Amount 41.04	
City Cincinnati	State OH	Zip Code 45212-3410	Transaction ID : VN7CZA36SN1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shenae Harrison		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7515 Roslyn St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15218-2518	Transaction ID : VN7CZA35TR9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	127.68
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shenae Harrison		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7515 Roslyn St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15218-2518	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35VV5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Shenae Harrison		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7515 Roslyn St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15218-2518	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35WY0
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Shenae Harrison		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7515 Roslyn St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15218-2518	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35Y09
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Harry		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 336 E Elma Ave		Amount 94.11	
City Laurel Springs	State NJ	Zip Code 08021-2110	Transaction ID : VN7CZA35KS3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Harry		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 336 E Elma Ave		Amount 94.11	
City Laurel Springs	State NJ	Zip Code 08021-2110	Transaction ID : VN7CZA35MT4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA373W8
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	199.31
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA373X6
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA373Y4
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA37442
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.27
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA37459
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA37467
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA374W1
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.27
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA374X9
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA374Y7
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA37544
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.27
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA37552
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA37560
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Healy		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36M88
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	56.38
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee John Healy		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36NT1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Healy		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36QC6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Healy		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36RY9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jonathan Hemingway		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA370N7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Hemingway		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA37179
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Hemingway		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA372X3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jonathan Hemingway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA373F6

Full Name (Last, First, Middle Initial) of Payee Rebecca Herlien		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 128 W 8th St		Amount 92.27	
City Beaver Dam	State KY	Zip Code 42320-1518	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35P12

Full Name (Last, First, Middle Initial) of Payee Rebecca Herlien		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 128 W 8th St		Amount 92.27	
City Beaver Dam	State KY	Zip Code 42320-1518	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35Q70

(a) SUBTOTAL of Itemized Independent Expenditures.....	207.34
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 26.43	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA360K2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 26.43	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA361C0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 26.43	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA363P2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.29
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 26.43	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA364E2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 4.25	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA36E52
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 4.25	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA36EF1
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	34.93
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 4.00	
City Cleveland	State OH	Zip Code 44115-2615	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA36FD6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 4.00	
City Cleveland	State OH	Zip Code 44115-2615	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA36FQ5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Sharlene Hicks		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 720 S Eureka Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43204-2914	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35PA3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sharlene Hicks		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 720 S Eureka Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43204-2914	Transaction ID : VN7CZA35QG1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Homewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5893 American Way		Amount 39.88	
City Orlando	State FL	Zip Code 32819-8201	Transaction ID : VN7CZA36JZ4
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Homewood Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5893 American Way		Amount 39.88	
City Orlando	State FL	Zip Code 32819-8201	Transaction ID : VN7CZA36K86
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	148.16
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jeremy Horne		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5116 Hawaiian Ter Apt 2		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1166	Transaction ID : VN7CZA36MK5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jeremy Horne		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5116 Hawaiian Ter Apt 2		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1166	Transaction ID : VN7CZA36P58
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jeremy Horne		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5116 Hawaiian Ter Apt 2		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1166	Transaction ID : VN7CZA36QQ3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jeremy Horne		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5116 Hawaiian Ter Apt 2		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1166	Transaction ID : VN7CZA36S96
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marcus Howell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 101 Roup Ave Apt 3		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15206-3437	Transaction ID : VN7CZA35TZ4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marcus Howell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 101 Roup Ave Apt 3		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15206-3437	Transaction ID : VN7CZA35W21
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Marcus Howell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 101 Roup Ave Apt 3		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15206-3437	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35X47	

Full Name (Last, First, Middle Initial) of Payee Marcus Howell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 101 Roup Ave Apt 3		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15206-3437	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35Y66	

Full Name (Last, First, Middle Initial) of Payee Nathan Hubbell-Staeble		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2010 Corning Ave		Amount 79.34	
City Cleveland	State OH	Zip Code 44109-1721	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35FX8	

(a) SUBTOTAL of Itemized Independent Expenditures.....	147.74
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nathan Hubbell-Staeble		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2010 Corning Ave		Amount 79.34	
City Cleveland	State OH	Zip Code 44109-1721	Transaction ID : VN7CZA35H93
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Justin Hullum		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1859 W 58th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44102-3252	Transaction ID : VN7CZA35G67
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Justin Hullum		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1859 W 58th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44102-3252	Transaction ID : VN7CZA35HJ4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	216.14
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Charles Hunt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 28.50	
City Chapel Hill	State NC	Zip Code 27514-7033	Transaction ID : VN7CZA35ZX8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Charles Hunt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 28.50	
City Chapel Hill	State NC	Zip Code 27514-7033	Transaction ID : VN7CZA360P6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Charles Hunt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 28.50	
City Chapel Hill	State NC	Zip Code 27514-7033	Transaction ID : VN7CZA36316
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	85.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Charles Hunt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 28.50	
City Chapel Hill	State NC	Zip Code 27514-7033	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA363S6

Full Name (Last, First, Middle Initial) of Payee Steven Hunter		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36MV8

Full Name (Last, First, Middle Initial) of Payee Steven Hunter		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36PD1

(a) SUBTOTAL of Itemized Independent Expenditures.....	96.90
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Steven Hunter		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36QZ6	

Full Name (Last, First, Middle Initial) of Payee Steven Hunter		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36SH9	

Full Name (Last, First, Middle Initial) of Payee Taylor Hurst		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA370T6	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Taylor Hurst		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA371C8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Taylor Hurst		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA37323
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Taylor Hurst		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 0000		Amount 22.80	
City Greensboro	State NC	Zip Code 27407	Transaction ID : VN7CZA373M5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36MR5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36PA8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36QW3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Muhammad Ibn Hayes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1842 E Allegheny Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19134-3120	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Muhammad Ibn Hayes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1842 E Allegheny Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19134-3120	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ikea Johnson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6737 S Bell Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60636-2524	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35F82
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought		40940.56	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Ikea Johnson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6737 S Bell Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60636-2524	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35FJ1
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought		40940.56	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Roseanna Jackson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3118 Pell Mell Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32818-2800	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36G14
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought		5628.98	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	152.90
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Roseanna Jackson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3118 Pell Mell Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32818-2800	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA36HM7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Kymberly Jacobs		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 280 W Johnstown Rd Apt D		Amount 89.16	
City Gahanna	State OH	Zip Code 43230-2762	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35P46
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Kymberly Jacobs		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 280 W Johnstown Rd Apt D		Amount 89.16	
City Gahanna	State OH	Zip Code 43230-2762	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35QA4
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 434889.86		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	212.52
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Annette James		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 32 E Lawson St Apt F		Amount 22.80	
City Durham	State NC	Zip Code 27701-4679	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA360B9

Full Name (Last, First, Middle Initial) of Payee Annette James		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 32 E Lawson St Apt F		Amount 22.80	
City Durham	State NC	Zip Code 27701-4679	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36147

Full Name (Last, First, Middle Initial) of Payee Annette James		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 32 E Lawson St Apt F		Amount 22.80	
City Durham	State NC	Zip Code 27701-4679	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA363E9

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Annette James		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 32 E Lawson St Apt F		Amount 22.80	
City Durham	State NC	Zip Code 27701-4679	Transaction ID : VN7CZA36469
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jack Jean-Baptiste		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA36GZ1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jack Jean-Baptiste		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA36JH4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jessie Jean-Baptiste		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 47.06	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA36G55
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		5628.98	

Full Name (Last, First, Middle Initial) of Payee Jessie Jean-Baptiste		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 47.06	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA36HR8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Kaisey Jefferson		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 4242 Honey Bee Ct		Amount 68.40	
City Grove City	State OH	Zip Code 43123-8497	Transaction ID : VN7CZA35PJ4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	162.52
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kaisey Jefferson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4242 Honey Bee Ct		Amount 68.40	
City Grove City	State OH	Zip Code 43123-8497	Transaction ID : VN7CZA35QR5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Full Name (Last, First, Middle Initial) of Payee Deedra Jenrett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2984 Maryland Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43209-1550	Transaction ID : VN7CZA35PX1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Deedra Jenrett		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2984 Maryland Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43209-1550	Transaction ID : VN7CZA35R31
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Johnathan Jones		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 11314 S Forest Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60628-5023	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35FD1

Full Name (Last, First, Middle Initial) of Payee Johnathan Jones		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 11314 S Forest Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60628-5023	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35FQ0

Full Name (Last, First, Middle Initial) of Payee Altrese Johnson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 54 Wilbe Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32805-1749	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36GG2

(a) SUBTOTAL of Itemized Independent Expenditures.....	152.90
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Altrese Johnson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 54 Wilbe Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32805-1749	Transaction ID : VN7CZA36J35
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Donald Johnson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2424 N 4th St		Amount 89.16	
City Columbus	State OH	Zip Code 43202-2707	Transaction ID : VN7CZA35P20
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Donald Johnson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2424 N 4th St		Amount 89.16	
City Columbus	State OH	Zip Code 43202-2707	Transaction ID : VN7CZA35Q88
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	212.52
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Paris Johnson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address PO Box 201504		Amount 68.40	
City Shaker Hts	State OH	Zip Code 44120-8108	Transaction ID : VN7CZA35G90
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Paris Johnson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address PO Box 201504		Amount 68.40	
City Shaker Hts	State OH	Zip Code 44120-8108	Transaction ID : VN7CZA35HN8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA370D3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	159.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA370Z6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA372N0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA37372
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Anita Jones		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 506 Wigman Dr		Amount 34.20	
City Maitland	State FL	Zip Code 32751-6936	Transaction ID : VN7CZA36GB3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Anita Jones		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 506 Wigman Dr		Amount 34.20	
City Maitland	State FL	Zip Code 32751-6936	Transaction ID : VN7CZA36HY6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Jordan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 722 Atwood Rd		Amount 68.40	
City Philadelphia	State PA	Zip Code 19151-3702	Transaction ID : VN7CZA35KX5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee William Jordan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 722 Atwood Rd		Amount 68.40	
City Philadelphia	State PA	Zip Code 19151-3702	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		126851.89	

Transaction ID : VN7CZA35MY6

Full Name (Last, First, Middle Initial) of Payee Dominique Jordan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1754 Lee Rd		Amount 79.30	
City Cleveland	State OH	Zip Code 44118-1736	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA35FV2

Full Name (Last, First, Middle Initial) of Payee Dominique Jordan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1754 Lee Rd		Amount 79.30	
City Cleveland	State OH	Zip Code 44118-1736	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Transaction ID : VN7CZA35H77

(a) SUBTOTAL of Itemized Independent Expenditures.....	227.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Brendan Joyce		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1897 W 74th St Apt 6		Amount 79.30	
City Cleveland	State OH	Zip Code 44102-2982	Transaction ID : VN7CZA35FZ3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brendan Joyce		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1897 W 74th St Apt 6		Amount 79.30	
City Cleveland	State OH	Zip Code 44102-2982	Transaction ID : VN7CZA35HB9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Verlissia Joyner		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1406 Woodside Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-6755	Transaction ID : VN7CZA370S8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	181.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Verlissia Joyner		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1406 Woodside Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-6755	Transaction ID : VN7CZA371B0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Verlissia Joyner		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1406 Woodside Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-6755	Transaction ID : VN7CZA37315
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Verlissia Joyner		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1406 Woodside Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-6755	Transaction ID : VN7CZA373K7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Douglas Karel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7841 Fairwind Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43235-4525	Transaction ID : VN7CZA35PM0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Douglas Karel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7841 Fairwind Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43235-4525	Transaction ID : VN7CZA35QT0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Robert Keegan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1989 W 58th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44102-3263	Transaction ID : VN7CZA35GP3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Robert Keegan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1989 W 58th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44102-3263	Transaction ID : VN7CZA35J21
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lydia Kelly		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 18915 Detroit Ext Apt 601		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-3242	Transaction ID : VN7CZA35GH4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lydia Kelly		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 18915 Detroit Ext Apt 601		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-3242	Transaction ID : VN7CZA35HX1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Taylor Kern		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA36KM0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Taylor Kern		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA36N65
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Taylor Kern		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA36PR8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Taylor Kern		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA36RA3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Adriane Kessler		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2205 Hedgerow Rd Unit H		Amount 68.40	
City Columbus	State OH	Zip Code 43220-6325	Transaction ID : VN7CZA35Q13
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Adriane Kessler		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2205 Hedgerow Rd Unit H		Amount 68.40	
City Columbus	State OH	Zip Code 43220-6325	Transaction ID : VN7CZA35R73
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36002
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA360S0
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36340
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA363W0

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.25	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36E02

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.25	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36EA1

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.30
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.00	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36F88

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.00	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36FJ5

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27609-7767	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36VD3

(a) SUBTOTAL of Itemized Independent Expenditures.....	30.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27609-7767	Transaction ID : VN7CZA36VR0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27609-7767	Transaction ID : VN7CZA36WS9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27609-7767	Transaction ID : VN7CZA36X46
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Brittany Knott		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36M39
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brittany Knott		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36NN2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brittany Knott		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36Q77
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Brittany Knott		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36RS0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Faessler Kollin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5926 Mausser Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-2922	Transaction ID : VN7CZA36GJ8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Faessler Kollin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5926 Mausser Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-2922	Transaction ID : VN7CZA36J51
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Lakendrea Pike		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 8421 S Kimbark Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60619-6442	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35F90
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought		40940.56	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Lakendrea Pike		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 8421 S Kimbark Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60619-6442	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35FK9
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought		40940.56	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Nery Lam		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3845 Goose Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32822-7715	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36GE7
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought		5628.98	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	152.90
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nery Lam		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3845 Goose Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32822-7715	Transaction ID : VN7CZA36J19
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Manuel Lampon		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2313 N Park Ave Apt 1		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA35KE6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Manuel Lampon		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2313 N Park Ave Apt 1		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA35MF7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Lindsey Lanier		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 130 E Longview St		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27516-1706	Transaction ID : VN7CZA360F1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lindsey Lanier		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 130 E Longview St		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27516-1706	Transaction ID : VN7CZA36188
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lindsey Lanier		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 130 E Longview St		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27516-1706	Transaction ID : VN7CZA363J1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Lindsey Lanier		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 130 E Longview St		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27516-1706	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA364A0

Full Name (Last, First, Middle Initial) of Payee Lauriano Rivera		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6725 N Sheridan Rd		Amount 59.35	
City Chicago	State IL	Zip Code 60626-4508	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35FB5

Full Name (Last, First, Middle Initial) of Payee Lauriano Rivera		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6725 N Sheridan Rd		Amount 59.35	
City Chicago	State IL	Zip Code 60626-4508	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35FN4

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Wilburt Laurore		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5228 Cinderlane Pkwy		Amount 34.20	
City Orlando	State FL	Zip Code 32808-1024	Transaction ID : VN7CZA36GT1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Wilburt Laurore		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5228 Cinderlane Pkwy		Amount 34.20	
City Orlando	State FL	Zip Code 32808-1024	Transaction ID : VN7CZA36JD4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee David Lebel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5972 Paint Creek Way		Amount 68.40	
City Hilliard	State OH	Zip Code 43026-7735	Transaction ID : VN7CZA35P79
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee David Lebel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5972 Paint Creek Way		Amount 68.40	
City Hilliard	State OH	Zip Code 43026-7735	Transaction ID : VN7CZA35QD8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eun Lee		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1107 Wineberry Ct		Amount 34.20	
City Ocoee	State FL	Zip Code 34761-3417	Transaction ID : VN7CZA36H25
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eun Lee		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1107 Wineberry Ct		Amount 34.20	
City Ocoee	State FL	Zip Code 34761-3417	Transaction ID : VN7CZA36JM8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Andres Lewis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 123 Sherbrook Blvd		Amount 68.40	
City Upper Darby	State PA	Zip Code 19082-4604	Transaction ID : VN7CZA35M58
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Andres Lewis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 123 Sherbrook Blvd		Amount 68.40	
City Upper Darby	State PA	Zip Code 19082-4604	Transaction ID : VN7CZA35M69
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Damir Lewis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1979 Plymouth St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2721	Transaction ID : VN7CZA35M09
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Damir Lewis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1979 Plymouth St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2721	Transaction ID : VN7CZA35N19
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Johnny Lewis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1202 Marlowe Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-2628	Transaction ID : VN7CZA35FT4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Johnny Lewis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1202 Marlowe Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-2628	Transaction ID : VN7CZA35H60
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Joshua Lewis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 79.25	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA35FW0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joshua Lewis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 79.25	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA35H85
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Todd Littlejohn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 306 Lea St Apt 3		Amount 45.60	
City Munhall	State PA	Zip Code 15120-2797	Transaction ID : VN7CZA35VJ4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	204.10
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Todd Littlejohn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 306 Lea St Apt 3		Amount 22.80	
City Munhall	State PA	Zip Code 15120-2797	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35WN9

Full Name (Last, First, Middle Initial) of Payee Todd Littlejohn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 306 Lea St Apt 3		Amount 22.80	
City Munhall	State PA	Zip Code 15120-2797	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35XQ7

Full Name (Last, First, Middle Initial) of Payee Todd Littlejohn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 306 Lea St Apt 3		Amount 45.60	
City Munhall	State PA	Zip Code 15120-2797	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35YS6

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Amir Longhorne		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA370J3	

Full Name (Last, First, Middle Initial) of Payee Amir Longhorne		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA37145	

Full Name (Last, First, Middle Initial) of Payee Amir Longhorne		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA372T0	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Amir Longhorne		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brandon Lugo		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2066 Nedra Ave		Amount 34.20	
City Deltona	State FL	Zip Code 32725-3363	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brandon Lugo		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2066 Nedra Ave		Amount 34.20	
City Deltona	State FL	Zip Code 32725-3363	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 22.80	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA360C7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 22.80	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA36154
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 22.80	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA363F7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 22.80	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA36477
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 4.25	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA36E44
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 4.25	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA36EE3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.30
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 4.00	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA36FC8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee David Lyman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4735 SW Luradel St Apt 25		Amount 4.00	
City Portland	State OR	Zip Code 97219-6875	Transaction ID : VN7CZA36FP7
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 22.80	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA36VH5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	30.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 22.80	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA36VW0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 22.80	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA36WX1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 22.80	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA36X88
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 4.17	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA36ZH2
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 4.17	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA36ZP2
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 4.17	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA37050
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 4.17	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA370A0
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tanda Makupson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1428 Golden Gate Blvd		Amount 68.40	
City Mayfield Hts	State OH	Zip Code 44124-6832	Transaction ID : VN7CZA35GD2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tanda Makupson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1428 Golden Gate Blvd		Amount 68.40	
City Mayfield Hts	State OH	Zip Code 44124-6832	Transaction ID : VN7CZA35HS0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	140.97
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Daniel Marasco		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5233 Stanton Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15201-2592	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35V85

Full Name (Last, First, Middle Initial) of Payee Daniel Marasco		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5233 Stanton Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15201-2592	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35WB2

Full Name (Last, First, Middle Initial) of Payee Daniel Marasco		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5233 Stanton Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15201-2592	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35XD8

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Daniel Marasco		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5233 Stanton Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15201-2592	Transaction ID : VN7CZA35YF7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tyreek Marsh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 127 E Kennedy Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15214-2731	Transaction ID : VN7CZA35VF1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tyreek Marsh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 127 E Kennedy Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15214-2731	Transaction ID : VN7CZA35WJ7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tyreek Marsh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 127 E Kennedy Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15214-2731	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35XM4
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		126851.89	

Full Name (Last, First, Middle Initial) of Payee Tyreek Marsh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 127 E Kennedy Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15214-2731	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35YP2
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		126851.89	

Full Name (Last, First, Middle Initial) of Payee Robert Martin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 418 Montrose Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1454	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA370H5
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		33651.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Robert Martin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 418 Montrose Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1454	Transaction ID : VN7CZA37137
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Robert Martin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 418 Montrose Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1454	Transaction ID : VN7CZA372S2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Robert Martin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 418 Montrose Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1454	Transaction ID : VN7CZA373B4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Hope McCain		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1389 E 171st St		Amount 68.40	
City Cleveland	State OH	Zip Code 44110-2525	Transaction ID : VN7CZA35G35
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hope McCain		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1389 E 171st St		Amount 68.40	
City Cleveland	State OH	Zip Code 44110-2525	Transaction ID : VN7CZA35HF1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marnetta McCain		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 252 E 244th St Apt 206		Amount 68.40	
City Euclid	State OH	Zip Code 44123-1463	Transaction ID : VN7CZA35GF8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Marnetta McCain		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 252 E 244th St Apt 206		Amount 68.40	
City Euclid	State OH	Zip Code 44123-1463	Transaction ID : VN7CZA35HV5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Razzah McDade		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4532 Commander Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-3666	Transaction ID : VN7CZA36G71
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Razzah McDade		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4532 Commander Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-3666	Transaction ID : VN7CZA36HT4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jason McDaniel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 658 SE 148th Ave		Amount 12.50	
City Portland	State OR	Zip Code 97233-2588	Transaction ID : VN7CZA35NW3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jason McDaniel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 658 SE 148th Ave		Amount 12.50	
City Portland	State OR	Zip Code 97233-2588	Transaction ID : VN7CZA35NY8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Stephanie McDonald		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1312 W Florida St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3320	Transaction ID : VN7CZA370P5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	47.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Stephanie McDonald		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1312 W Florida St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3320	Transaction ID : VN7CZA37187
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Stephanie McDonald		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1312 W Florida St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3320	Transaction ID : VN7CZA372Y1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Stephanie McDonald		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1312 W Florida St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3320	Transaction ID : VN7CZA373G4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA370G7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA37129
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA372R4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA373A6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Linsey McGlocklin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12530 Lake Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1574	Transaction ID : VN7CZA35GW1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Linsey McGlocklin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12530 Lake Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1574	Transaction ID : VN7CZA35J88
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	159.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Howard McMillan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5907 Lawndale St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1209	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA35M24

Full Name (Last, First, Middle Initial) of Payee Howard McMillan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5907 Lawndale St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1209	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		126851.89	

Transaction ID : VN7CZA35N35

Full Name (Last, First, Middle Initial) of Payee Dominique McQueary		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1621 Harvard Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43203-1249	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA35PP6

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Dominique McQueary		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1621 Harvard Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43203-1249	Transaction ID : VN7CZA35QW6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Full Name (Last, First, Middle Initial) of Payee Julio Mercado		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2046 W 47th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44102-4548	Transaction ID : VN7CZA35GZ4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Julio Mercado		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2046 W 47th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44102-4548	Transaction ID : VN7CZA35JB2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Day Metvier		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 10949 Oberlin Rd		Amount 102.60	
City Oberlin	State OH	Zip Code 44074-9771	Transaction ID : VN7CZA35GM7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Day Metvier		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 10949 Oberlin Rd		Amount 102.60	
City Oberlin	State OH	Zip Code 44074-9771	Transaction ID : VN7CZA35J05
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Diana Metobob		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2335 N Carlisle St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4515	Transaction ID : VN7CZA35KF4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	273.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Diana Metobob		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2335 N Carlisle St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4515	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35MG5	

Full Name (Last, First, Middle Initial) of Payee Jazzmine Miles		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36N24	

Full Name (Last, First, Middle Initial) of Payee Jazzmine Miles		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36PM7	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jazzmine Miles		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36R62
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jazzmine Miles		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36SR5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sonny Mobley		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36ME6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sonny Mobley		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36P09
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sonny Mobley		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36QJ4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sonny Mobley		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36S47
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kayci Moodie		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1920 73rd Ave		Amount 94.11	
City Philadelphia	State PA	Zip Code 19138-2711	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35KD8

Full Name (Last, First, Middle Initial) of Payee Kayci Moodie		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1920 73rd Ave		Amount 94.11	
City Philadelphia	State PA	Zip Code 19138-2711	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35ME9

Full Name (Last, First, Middle Initial) of Payee Sandra Moore		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2623 Oakdale Ave		Amount 68.40	
City Lorain	State OH	Zip Code 44055-1061	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35GA8

(a) SUBTOTAL of Itemized Independent Expenditures.....	256.62
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sandra Moore		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2623 Oakdale Ave		Amount 68.40	
City Lorain	State OH	Zip Code 44055-1061	Transaction ID : VN7CZA35HP6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Deja Moore Goodwin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 17.10	
City Cincinnati	State OH	Zip Code 45238-3434	Transaction ID : VN7CZA36KQ4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Deja Moore Goodwin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 17.10	
City Cincinnati	State OH	Zip Code 45238-3434	Transaction ID : VN7CZA36N99
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Deja Moore Goodwin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 17.10	
City Cincinnati	State OH	Zip Code 45238-3434	Transaction ID : VN7CZA36PV2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Deja Moore Goodwin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 17.10	
City Cincinnati	State OH	Zip Code 45238-3434	Transaction ID : VN7CZA36RD7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Daniel Moraff		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 305 Maple Ln		Amount 45.60	
City Sewickley	State PA	Zip Code 15143-1054	Transaction ID : VN7CZA35V77
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Daniel Moraff		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 305 Maple Ln		Amount 22.80	
City Sewickley	State PA	Zip Code 15143-1054	Transaction ID : VN7CZA35WA4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Daniel Moraff		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 305 Maple Ln		Amount 22.80	
City Sewickley	State PA	Zip Code 15143-1054	Transaction ID : VN7CZA35XC1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Daniel Moraff		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 305 Maple Ln		Amount 45.60	
City Sewickley	State PA	Zip Code 15143-1054	Transaction ID : VN7CZA35YE9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Stacey Morgan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36MQ7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Stacey Morgan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36P90
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Stacey Morgan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36QV5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Stacey Morgan		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36SD8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cheyenne Morole		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1944 Crestview Dr		Amount 7.13	
City Fayetteville	State NC	Zip Code 28304-5247	Transaction ID : VN7CZA360J4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cheyenne Morole		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1944 Crestview Dr		Amount 7.13	
City Fayetteville	State NC	Zip Code 28304-5247	Transaction ID : VN7CZA361B2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	48.46
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Cheyenne Morole		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1944 Crestview Dr		Amount 7.13	
City Fayetteville	State NC	Zip Code 28304-5247	Transaction ID : VN7CZA363N4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cheyenne Morole		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1944 Crestview Dr		Amount 7.13	
City Fayetteville	State NC	Zip Code 28304-5247	Transaction ID : VN7CZA364D4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marvin Morris		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36N08
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	48.46
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Marvin Morris		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36PJ1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marvin Morris		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36R46
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marvin Morris		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36SP9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	Transaction ID : VN7CZA37584
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	Transaction ID : VN7CZA375B8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	Transaction ID : VN7CZA375M9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA375Q2

Full Name (Last, First, Middle Initial) of Payee Malik Muhammad		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 560 W 7th Ave		Amount 45.60	
City West Homestead	State PA	Zip Code 15120-1053	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35VN8

Full Name (Last, First, Middle Initial) of Payee Malik Muhammad		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 560 W 7th Ave		Amount 22.80	
City West Homestead	State PA	Zip Code 15120-1053	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35WR3

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.57
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Malik Muhammad		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 560 W 7th Ave		Amount 22.80	
City West Homestead	State PA	Zip Code 15120-1053	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Malik Muhammad		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 560 W 7th Ave		Amount 45.60	
City West Homestead	State PA	Zip Code 15120-1053	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee James Murray		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 59.44	
City Pittsburgh	State PA	Zip Code 15238-1420	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	127.84
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee James Murray		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 29.72	
City Pittsburgh	State PA	Zip Code 15238-1420	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee James Murray		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 29.72	
City Pittsburgh	State PA	Zip Code 15238-1420	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee James Murray		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 59.44	
City Pittsburgh	State PA	Zip Code 15238-1420	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	118.88
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Damien Navarro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 31 E Armat St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-2201	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA35M40

Full Name (Last, First, Middle Initial) of Payee Damien Navarro		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 31 E Armat St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-2201	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		126851.89	

Transaction ID : VN7CZA35N51

Full Name (Last, First, Middle Initial) of Payee Youssouf Ndiaye		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA36MG2

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Youssouf Ndiaye		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36P25
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Youssouf Ndiaye		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36QM0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Youssouf Ndiaye		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36S63
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Letecia Nevels		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3024 Wadlow St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15212-2402	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35VA1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Letecia Nevels		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3024 Wadlow St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15212-2402	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35WD8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Letecia Nevels		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3024 Wadlow St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15212-2402	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35XF4
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Leticia Nevels		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3024 Wadlow St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15212-2402	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Darius Nixon		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3100 Lemay Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27604-1626	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Darius Nixon		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3100 Lemay Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27604-1626	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	91.20
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Darius Nixon		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3100 Lemay Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27604-1626	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Darius Nixon		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3100 Lemay Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27604-1626	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Deon Nixon		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2923 Northern Woods Ln		Amount 21.38	
City Columbus	State OH	Zip Code 43231-6738	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	66.98
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Deon Nixon		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2923 Northern Woods Ln		Amount 21.38	
City Columbus	State OH	Zip Code 43231-6738	Transaction ID : VN7CZA35RB5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Peyton Nobles		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1237 Rutledge Landing Dr		Amount 22.80	
City Knightdale	State NC	Zip Code 27545-8148	Transaction ID : VN7CZA36VM9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Peyton Nobles		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1237 Rutledge Landing Dr		Amount 22.80	
City Knightdale	State NC	Zip Code 27545-8148	Transaction ID : VN7CZA36VZ4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	66.98
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Peyton Nobles		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1237 Rutledge Landing Dr		Amount 22.80	
City Knightdale	State NC	Zip Code 27545-8148	Transaction ID : VN7CZA36X04
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Peyton Nobles		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1237 Rutledge Landing Dr		Amount 22.80	
City Knightdale	State NC	Zip Code 27545-8148	Transaction ID : VN7CZA36XB1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Steven Nourse		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4708 Cadmus Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43228-8404	Transaction ID : VN7CZA35P95
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Steven Nourse		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4708 Cadmus Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43228-8404	Transaction ID : VN7CZA35QF3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Full Name (Last, First, Middle Initial) of Payee Eladio Olivo Martinez		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6942 Keystone St Apt 2A		Amount 68.40	
City Philadelphia	State PA	Zip Code 19135-2040	Transaction ID : VN7CZA35KZ1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Eladio Olivo Martinez		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6942 Keystone St Apt 2A		Amount 68.40	
City Philadelphia	State PA	Zip Code 19135-2040	Transaction ID : VN7CZA35N01
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		126851.89	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shawn Olszewski		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 131 Harcourt Dr		Amount 68.40	
City Akron	State OH	Zip Code 44313-6508	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35GC4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Shawn Olszewski		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 131 Harcourt Dr		Amount 68.40	
City Akron	State OH	Zip Code 44313-6508	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35HR2
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	
		434889.86	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/Type	Transaction ID : VN7CZA364Y8
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	
		33651.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	165.55
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA364Z6
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		33651.35	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36504
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		33651.35	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36512
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		33651.35	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	86.25
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36520

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 44.05	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36538

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 18.53	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36546

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.33
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 66.06	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36554
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 66.06	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36562
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 66.06	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36579
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	198.18
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.70	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36587	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 66.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36595	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA365A3	

(a) SUBTOTAL of Itemized Independent Expenditures.....	160.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA365B1	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.70	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA365C9	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 89.10	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA365D7	

(a) SUBTOTAL of Itemized Independent Expenditures.....	183.55
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA365E5

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.70	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA365F3

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 66.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA365G1

(a) SUBTOTAL of Itemized Independent Expenditures.....	160.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA365H8	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 59.33	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA365J6	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 66.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA365K4	

(a) SUBTOTAL of Itemized Independent Expenditures.....	154.14
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 18.53	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA365M2
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.81	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA365N0
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.11	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA365P8
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	149.45
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 89.10	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA365Q6

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.81	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA365R4

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.11	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA365S2

(a) SUBTOTAL of Itemized Independent Expenditures.....	220.02
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.11	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA365T0
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.11	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA365V7
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 67.83	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA365W5
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	198.05
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 89.10	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA365X3	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.11	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA365Y1	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.81	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA365Z9	

(a) SUBTOTAL of Itemized Independent Expenditures.....	220.02
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 66.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36605

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.11	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36613

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA366G1

(a) SUBTOTAL of Itemized Independent Expenditures.....	159.92
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA366H9

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA366J7

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA366K5

(a) SUBTOTAL of Itemized Independent Expenditures.....	86.25
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		33651.35	

Transaction ID : VN7CZA366M3

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 44.05	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		33651.35	

Transaction ID : VN7CZA366N1

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 18.53	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		33651.35	

Transaction ID : VN7CZA366P9

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.33
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 66.06	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA366Q7
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 66.06	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA366R5
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 66.06	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA366S2
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	198.18
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.70	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA366T0	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 66.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA366V8	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA366W6	

(a) SUBTOTAL of Itemized Independent Expenditures.....	160.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA366X4
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.70	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA366Y2
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 89.10	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA366Z0
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	183.55
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36708	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.70	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36716	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 66.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36724	

(a) SUBTOTAL of Itemized Independent Expenditures.....	160.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 28.75	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36731
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 59.33	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36749
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 66.06	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36757
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	154.14
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 18.53	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36765
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
33651.35			

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.81	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36773
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
33651.35			

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.11	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36781
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
33651.35			

(a) SUBTOTAL of Itemized Independent Expenditures.....	149.45
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 89.10	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36799	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.81	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA367A7	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.11	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA367B5	

(a) SUBTOTAL of Itemized Independent Expenditures.....	220.02
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.11	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA367C3
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.11	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA367D0
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 67.83	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA367E8
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	198.05
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 89.10	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA367F6	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.11	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA367G4	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.81	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA367H2	

(a) SUBTOTAL of Itemized Independent Expenditures.....	220.02
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 66.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA367J0	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 65.11	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA367K8	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36B63	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	158.23
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36B71
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36B89
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36B97
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	81.18
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36BA5

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 41.46	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36BB3

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 17.44	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36BC1

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	85.96
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 62.18	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36BD9
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 62.18	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36BE7
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 62.18	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36BF4
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	186.54
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	▶	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.84	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36BG2
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 62.18	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36BH0
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36BJ8
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	151.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		648181.85	

Transaction ID : VN7CZA36BK6

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.84	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		648181.85	

Transaction ID : VN7CZA36BM4

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 83.86	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2016	
		648181.85	

Transaction ID : VN7CZA36BN2

(a) SUBTOTAL of Itemized Independent Expenditures.....	172.76
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36BP0

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.84	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36BQ8

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 62.18	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36BR6

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	151.08
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36BS3

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 55.84	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36BT1

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 62.18	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36BV9

(a) SUBTOTAL of Itemized Independent Expenditures.....	145.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 17.44	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36BW7
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.94	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36BX5
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.28	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36BY3
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	140.66
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 83.86	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36BZ1

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.94	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36C09

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.28	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36C17

(a) SUBTOTAL of Itemized Independent Expenditures.....	207.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.28	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36C25
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.28	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36C32
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 63.84	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36C40
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	186.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 83.86	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36C58

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.28	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36C66

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.94	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36C74

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	207.08
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 62.18	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36C80
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.28	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36C98
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36CR6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	150.52
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36CS4
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36CT2
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36CV0
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	81.18
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36CW8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 41.46	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36CX6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 17.44	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36CY4
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	85.96
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 62.18	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36CZ2
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 62.18	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36D00
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 62.18	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36D17
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	186.54
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.84	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36D25
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 62.18	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36D33
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36D41
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	151.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36D59

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.84	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36D67

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 83.86	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36D75

(a) SUBTOTAL of Itemized Independent Expenditures.....	172.76
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36D83

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.84	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36D91

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 62.18	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36DA9

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	151.08
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 27.06	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36DB6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 55.84	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36DC4
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 62.18	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36DD2
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	145.08
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 17.44	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36DE0
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.94	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36DF8
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.28	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36DG6
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	140.66
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 83.86	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36DH4

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.94	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36DJ2

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.28	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36DK0

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	207.08
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.28	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36DM8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.28	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36DN5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 63.84	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36DP3
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	186.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 83.86	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36DQ1

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.28	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36DR9

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.94	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36DS7

(a) SUBTOTAL of Itemized Independent Expenditures.....	207.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 62.18	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36DT5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 61.28	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36DV3
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 69.03	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA36XN0
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	192.49
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 110.45	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36XP8

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 69.03	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36Y07

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 110.45	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36Y15

(a) SUBTOTAL of Itemized Independent Expenditures.....	289.93
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 69.03	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36Z16
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 110.45	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36Z24
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 69.03	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36ZC3
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	248.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 110.45	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA36ZD1
Purpose of Expenditure Travel	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Aida Ortiz		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5924 Auver Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32807-3764	Transaction ID : VN7CZA36G89
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Aida Ortiz		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5924 Auver Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32807-3764	Transaction ID : VN7CZA36HV2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	178.85
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Lesche Owens		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12001 Towa Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44108	Transaction ID : VN7CZA35GJ2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lesche Owens		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12001 Towa Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44108	Transaction ID : VN7CZA35HY9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shanell Pack		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7814 Empire Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32810-2618	Transaction ID : VN7CZA36GS3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shanell Pack		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7814 Empire Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32810-2618	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36JC6	

Full Name (Last, First, Middle Initial) of Payee Richard Palmer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 710 Armandale St		Amount 59.44	
City Pittsburgh	State PA	Zip Code 15212-4078	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35TS7	

Full Name (Last, First, Middle Initial) of Payee Richard Palmer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 710 Armandale St		Amount 29.72	
City Pittsburgh	State PA	Zip Code 15212-4078	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35VW3	

(a) SUBTOTAL of Itemized Independent Expenditures.....	123.36
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Richard Palmer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 710 Armandale St		Amount 29.72	
City Pittsburgh	State PA	Zip Code 15212-4078	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35WZ8	

Full Name (Last, First, Middle Initial) of Payee Richard Palmer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 710 Armandale St		Amount 59.44	
City Pittsburgh	State PA	Zip Code 15212-4078	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35Y16	

Full Name (Last, First, Middle Initial) of Payee Jasmyn Parham		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36M70	

(a) SUBTOTAL of Itemized Independent Expenditures.....	123.36
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jasmyn Parham		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36NS3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jasmyn Parham		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36QB8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jasmyn Parham		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36RX1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Casohn Peoples		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6802 McKinley Ct		Amount 45.60	
City Clairton	State PA	Zip Code 15025-5149	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35VD5
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Casohn Peoples		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6802 McKinley Ct		Amount 22.80	
City Clairton	State PA	Zip Code 15025-5149	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35WG1
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Casohn Peoples		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6802 McKinley Ct		Amount 22.80	
City Clairton	State PA	Zip Code 15025-5149	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35XJ8
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Casohn Peoples		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6802 McKinley Ct		Amount 45.60	
City Clairton	State PA	Zip Code 15025-5149	Transaction ID : VN7CZA35YM7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Alexander Perkins		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1461 Felton St		Amount 34.20	
City Deltona	State FL	Zip Code 32725-5936	Transaction ID : VN7CZA36H66
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Alexander Perkins		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1461 Felton St		Amount 34.20	
City Deltona	State FL	Zip Code 32725-5936	Transaction ID : VN7CZA36JR9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee William Peterman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 874 Garlow Blvd		Amount 37.05	
City Pittsburgh	State PA	Zip Code 15239-1112	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35VE3

Full Name (Last, First, Middle Initial) of Payee William Peterman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 874 Garlow Blvd		Amount 18.52	
City Pittsburgh	State PA	Zip Code 15239-1112	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35WH9

Full Name (Last, First, Middle Initial) of Payee William Peterman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 874 Garlow Blvd		Amount 18.52	
City Pittsburgh	State PA	Zip Code 15239-1112	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35XK6

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.09
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee William Peterman		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 874 Garlow Blvd		Amount 37.05	
City Pittsburgh	State PA	Zip Code 15239-1112	Transaction ID : VN7CZA35YN4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Philip Pirdy		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36M13
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Philip Pirdy		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36NK8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	105.45
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Philip Pirdy		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36Q51

Full Name (Last, First, Middle Initial) of Payee Philip Pirdy		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36RQ6

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 33.02	
City Portland	State OR	Zip Code 97236-3342	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36VG7

(a) SUBTOTAL of Itemized Independent Expenditures.....	101.42
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 33.02	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA36VV4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 33.02	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA36WW3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 33.02	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA36X70
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	99.06
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 4.17	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA36ZG4
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 4.17	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA36ZN4
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 4.17	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA37042
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	12.51
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 4.17	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA37092
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Latasha Powers		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2117 N Hastings St		Amount 34.20	
City Orlando	State FL	Zip Code 32808-4810	Transaction ID : VN7CZA36GP0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Latasha Powers		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2117 N Hastings St		Amount 34.20	
City Orlando	State FL	Zip Code 32808-4810	Transaction ID : VN7CZA36J93
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.57
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Wisdom Presley		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1952 Elston St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2719	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35KK6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	
		648181.85	

Full Name (Last, First, Middle Initial) of Payee Wisdom Presley		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1952 Elston St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2719	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35MM7
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	
		126851.89	

Full Name (Last, First, Middle Initial) of Payee Donna Putnam		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1021 Bellows Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43223-1517	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35P87
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	
		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Donna Putnam		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1021 Bellows Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43223-1517	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		434889.86	

Transaction ID : VN7CZA35QE6

Full Name (Last, First, Middle Initial) of Payee Kevin Quarles		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4572	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA370Q2

Full Name (Last, First, Middle Initial) of Payee Kevin Quarles		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4572	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA37195

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kevin Quarles		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4572	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA372Z9
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Kevin Quarles		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4572	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA373H1
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Joshua Quesada		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 5424 Montague St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1417	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35MB5
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Joshua Quesada		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5424 Montague St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1417	Transaction ID : VN7CZA35NC6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sadiqa Rahn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 16104 Scottsdale Blvd		Amount 68.40	
City Cleveland	State OH	Zip Code 44120-5037	Transaction ID : VN7CZA35GT5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sadiqa Rahn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 16104 Scottsdale Blvd		Amount 68.40	
City Cleveland	State OH	Zip Code 44120-5037	Transaction ID : VN7CZA35J62
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 423 Probasco St		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA36KJ5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 423 Probasco St		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA36N40
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 423 Probasco St		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA36PP3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.24
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 423 Probasco St		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA36R88
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Edward Ray		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2915 Arlington Ave		Amount 44.17	
City Pittsburgh	State PA	Zip Code 15210-1947	Transaction ID : VN7CZA35VH6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Edward Ray		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2915 Arlington Ave		Amount 22.09	
City Pittsburgh	State PA	Zip Code 15210-1947	Transaction ID : VN7CZA35WM1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	113.34
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Edward Ray		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2915 Arlington Ave		Amount 22.09	
City Pittsburgh	State PA	Zip Code 15210-1947	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35XP0

Full Name (Last, First, Middle Initial) of Payee Edward Ray		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2915 Arlington Ave		Amount 44.17	
City Pittsburgh	State PA	Zip Code 15210-1947	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35YR8

Full Name (Last, First, Middle Initial) of Payee Red Roof Inn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1813 S Saunders St		Amount 14.30	
City Raleigh	State NC	Zip Code 27603-2315	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36XH9

(a) SUBTOTAL of Itemized Independent Expenditures.....	80.56
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Red Roof Inn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1813 S Saunders St		Amount 14.30	
City Raleigh	State NC	Zip Code 27603-2315	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA36XW6
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		33651.35	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Red Roof Inn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1813 S Saunders St		Amount 14.30	
City Raleigh	State NC	Zip Code 27603-2315	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA36YX6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		648181.85	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Red Roof Inn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1813 S Saunders St		Amount 14.30	
City Raleigh	State NC	Zip Code 27603-2315	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA36Z81
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		648181.85	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	42.90
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Cindy Reed		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 23116 39th Ave E		Amount 6.38	
City Spanaway	State WA	Zip Code 98387-6964	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36KE3

Full Name (Last, First, Middle Initial) of Payee Cindy Reed		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 23116 39th Ave E		Amount 6.38	
City Spanaway	State WA	Zip Code 98387-6964	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36KF1

Full Name (Last, First, Middle Initial) of Payee Tameka Reeves		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2176 Haviland Dr Apt 7		Amount 68.40	
City Columbus	State OH	Zip Code 43207-2217	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35PF1

(a) SUBTOTAL of Itemized Independent Expenditures.....	81.16
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tameka Reeves		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2176 Haviland Dr Apt 7		Amount 68.40	
City Columbus	State OH	Zip Code 43207-2217	Transaction ID : VN7CZA35QN1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Craig Rembert		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3513 Wells St		Amount 34.20	
City Orlando	State FL	Zip Code 32805-4286	Transaction ID : VN7CZA36H09
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Craig Rembert		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3513 Wells St		Amount 34.20	
City Orlando	State FL	Zip Code 32805-4286	Transaction ID : VN7CZA36JJ2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jasua Render		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7701 Camden Ave		Amount 79.34	
City Cleveland	State OH	Zip Code 44102-5024	Transaction ID : VN7CZA35FY6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jasua Render		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7701 Camden Ave		Amount 79.34	
City Cleveland	State OH	Zip Code 44102-5024	Transaction ID : VN7CZA35HA1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tarah Reppert		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 740 E Vernon Rd Apt 310		Amount 94.11	
City Philadelphia	State PA	Zip Code 19119-1508	Transaction ID : VN7CZA35KC1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	252.79
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tarah Reppert		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 740 E Vernon Rd Apt 310		Amount 94.11	
City Philadelphia	State PA	Zip Code 19119-1508	Transaction ID : VN7CZA35MD1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		126851.89	

Full Name (Last, First, Middle Initial) of Payee Iris Rivera		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7350 Westpointe Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32835-6192	Transaction ID : VN7CZA36G63
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		5628.98	

Full Name (Last, First, Middle Initial) of Payee Iris Rivera		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7350 Westpointe Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32835-6192	Transaction ID : VN7CZA36HS6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	162.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Marceia Robinson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 62 N 17th St		Amount 68.40	
City Columbus	State OH	Zip Code 43203-1801	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Marceia Robinson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 62 N 17th St		Amount 68.40	
City Columbus	State OH	Zip Code 43203-1801	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thomas Robinson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Robinson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36NY3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Robinson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36QG8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Robinson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36S21
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA36077
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA36105
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA363B5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA36435
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Edriel Rodriguez		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3194 Mapleshade St		Amount 34.20	
City Deltona	State FL	Zip Code 32738-4472	Transaction ID : VN7CZA36H74
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Edriel Rodriguez		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3194 Mapleshade St		Amount 34.20	
City Deltona	State FL	Zip Code 32738-4472	Transaction ID : VN7CZA36JS7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jeanette Rose		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5590 Gary Ave		Amount 68.40	
City Bedford	State OH	Zip Code 44146-2453	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35H02

Full Name (Last, First, Middle Initial) of Payee Jeanette Rose		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 5590 Gary Ave		Amount 68.40	
City Bedford	State OH	Zip Code 44146-2453	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35JC0

Full Name (Last, First, Middle Initial) of Payee Elijuan Ross		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3554 Farmington Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5884	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA370C6

(a) SUBTOTAL of Itemized Independent Expenditures.....	159.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Elijuan Ross		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3554 Farmington Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5884	Transaction ID : VN7CZA370Y8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elijuan Ross		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3554 Farmington Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5884	Transaction ID : VN7CZA372M2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elijuan Ross		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3554 Farmington Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5884	Transaction ID : VN7CZA37365
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Johnny Rucker		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36M96
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Johnny Rucker		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36NV9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Johnny Rucker		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36QD4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Johnny Rucker		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36RZ7	

Full Name (Last, First, Middle Initial) of Payee Forest Ruge-Whitacre		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 44.17	
City Pittsburgh	State PA	Zip Code 15221-3510	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35TW1	

Full Name (Last, First, Middle Initial) of Payee Forest Ruge-Whitacre		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 22.09	
City Pittsburgh	State PA	Zip Code 15221-3510	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35VZ7	

(a) SUBTOTAL of Itemized Independent Expenditures.....	100.46
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Forest Ruge-Whitacre		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 22.09	
City Pittsburgh	State PA	Zip Code 15221-3510	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35X14

Full Name (Last, First, Middle Initial) of Payee Forest Ruge-Whitacre		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 44.17	
City Pittsburgh	State PA	Zip Code 15221-3510	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35Y32

Full Name (Last, First, Middle Initial) of Payee Luzmeilyn Ruiz		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 451 S Semoran Blvd Apt 101		Amount 45.82	
City Orlando	State FL	Zip Code 32807-4301	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36FS1

(a) SUBTOTAL of Itemized Independent Expenditures.....	112.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Luzmeilyn Ruiz		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 451 S Semoran Blvd Apt 101		Amount 45.82	
City Orlando	State FL	Zip Code 32807-4301	Transaction ID : VN7CZA36HC4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Leila Russell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1409 Flora Lee Dr		Amount 34.20	
City Leesburg	State FL	Zip Code 34748-3464	Transaction ID : VN7CZA36GA5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		5628.98	

Full Name (Last, First, Middle Initial) of Payee Leila Russell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1409 Flora Lee Dr		Amount 34.20	
City Leesburg	State FL	Zip Code 34748-3464	Transaction ID : VN7CZA36HX8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.22
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12616 NE 79th St		Amount 33.02	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA36085
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12616 NE 79th St		Amount 33.02	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA36113
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12616 NE 79th St		Amount 33.02	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA363C3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	99.06
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12616 NE 79th St		Amount 33.02	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA36443
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12616 NE 79th St		Amount 4.25	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA36E28
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12616 NE 79th St		Amount 4.25	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA36EC7
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.52
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12616 NE 79th St		Amount 4.00	
City Vancouver	State WA	Zip Code 98682-4005	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA36FA4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12616 NE 79th St		Amount 4.00	
City Vancouver	State WA	Zip Code 98682-4005	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA36FM1
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ryan Davis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 8238 S Wood St		Amount 59.35	
City Chicago	State IL	Zip Code 60620-4646	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35F40
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought 40940.56		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	67.35
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ryan Davis		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 8238 S Wood St		Amount 59.35	
City Chicago	State IL	Zip Code 60620-4646	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35FE9	

Full Name (Last, First, Middle Initial) of Payee Yawo Sadj		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6658 Seahurst Dr		Amount 68.40	
City Canal Winchester	State OH	Zip Code 43110-9017	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35PS0	

Full Name (Last, First, Middle Initial) of Payee Yawo Sadj		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6658 Seahurst Dr		Amount 68.40	
City Canal Winchester	State OH	Zip Code 43110-9017	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35QZ0	

(a) SUBTOTAL of Itemized Independent Expenditures.....	196.15
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Samuel Ortiz		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7859 BS South Shore Dr. apt 3W		Amount 104.02	
City Chicago	State IL	Zip Code 60649	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35F66

Full Name (Last, First, Middle Initial) of Payee Samuel Ortiz		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7859 BS South Shore Dr. apt 3W		Amount 104.02	
City Chicago	State IL	Zip Code 60649	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35FG5

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address Whisperwood Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27616	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36VE1

(a) SUBTOTAL of Itemized Independent Expenditures.....	230.84
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address Whisperwood Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27616	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA36VS8
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address Whisperwood Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27616	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA36WT7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> House <input type="checkbox"/> Senate	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address Whisperwood Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27616	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA36X54
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> House <input type="checkbox"/> Senate	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sarah Jackson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 638 N Saint Louis Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60624-1365	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sarah Jackson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 638 N Saint Louis Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60624-1365	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 40940.56		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shaakira Sargent		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 36.34	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	155.04
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shaakira Sargent		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 36.34	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shaakira Sargent		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 36.34	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shaakira Sargent		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 36.34	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	109.02
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Pedro Sarsama		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4507 W 20th St		Amount 55.86	
City Cleveland	State OH	Zip Code 44109-4443	Transaction ID : VN7CZA35H28
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Pedro Sarsama		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4507 W 20th St		Amount 55.86	
City Cleveland	State OH	Zip Code 44109-4443	Transaction ID : VN7CZA35JE6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee ZhaiRon Scales		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2308 Argyle Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43219-1404	Transaction ID : VN7CZA35PH6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	180.12
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee ZhaiRon Scales		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2308 Argyle Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43219-1404	Transaction ID : VN7CZA35QQ7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 46.03	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36MY2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 46.03	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36PG5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	160.46
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 46.03	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 46.03	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee David Schlosser		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3 Kingsland Dr		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15202-1419	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	137.66
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee David Schlosser		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3 Kingsland Dr		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15202-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35W62

Full Name (Last, First, Middle Initial) of Payee David Schlosser		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3 Kingsland Dr		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15202-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35X89

Full Name (Last, First, Middle Initial) of Payee David Schlosser		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3 Kingsland Dr		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15202-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35YA8

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Serrin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1730 Gurtler Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32804-6427	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36GN2
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Michael Serrin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1730 Gurtler Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32804-6427	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36J85
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Sahro Sharif		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2156 Margo Rd		Amount 68.40	
City Columbus	State OH	Zip Code 43229-5768	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35PY9
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Sahro Sharif		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2156 Margo Rd		Amount 68.40	
City Columbus	State OH	Zip Code 43229-5768	Transaction ID : VN7CZA35R49
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shelbie Press Print & Copy		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1203 N Mills Ave		Amount 239.63	
City Orlando	State FL	Zip Code 32803-2540	Transaction ID : VN7CZA36KG9
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shelbie Press Print & Copy		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1203 N Mills Ave		Amount 239.63	
City Orlando	State FL	Zip Code 32803-2540	Transaction ID : VN7CZA36KH7
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	547.66
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 3337 Clifton Ave		Amount 10.44	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA36T40
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 3337 Clifton Ave		Amount 5.72	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA36T57
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 3337 Clifton Ave		Amount 10.44	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA36TG4
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	26.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3337 Clifton Ave		Amount 5.72	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36TH2

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3337 Clifton Ave		Amount 10.44	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36TW9

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3337 Clifton Ave		Amount 5.72	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36TX7

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.88
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3337 Clifton Ave		Amount 10.44	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36V84	

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3337 Clifton Ave		Amount 5.72	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36V92	

Full Name (Last, First, Middle Initial) of Payee Shell Quality Mart		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4789 Beryl Road		Amount 5.73	
City Raleigh	State NC	Zip Code 27606-1405	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36XF3	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.89
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shell Quality Mart		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4789 Beryl Road		Amount 5.73	
City Raleigh	State NC	Zip Code 27606-1405	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		33651.35	

Transaction ID : VN7CZA36XT0

Full Name (Last, First, Middle Initial) of Payee Shell Quality Mart		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4789 Beryl Road		Amount 5.73	
City Raleigh	State NC	Zip Code 27606-1405	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA36YV0

Full Name (Last, First, Middle Initial) of Payee Shell Quality Mart		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4789 Beryl Road		Amount 5.73	
City Raleigh	State NC	Zip Code 27606-1405	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA36Z65

(a) SUBTOTAL of Itemized Independent Expenditures.....	17.19
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Nandi Shepherd		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1844 N 22nd St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19121-2111	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35MA8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		648181.85	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Nandi Shepherd		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1844 N 22nd St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19121-2111	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35NB8
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		126851.89	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Gianna Simmons		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 59.44	
City New Florence	State PA	Zip Code 15944-8402	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA35TX8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		648181.85	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	196.24
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Gianna Simmons		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 29.72	
City New Florence	State PA	Zip Code 15944-8402	Transaction ID : VN7CZA35W05
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gianna Simmons		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 29.72	
City New Florence	State PA	Zip Code 15944-8402	Transaction ID : VN7CZA35X22
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gianna Simmons		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 59.44	
City New Florence	State PA	Zip Code 15944-8402	Transaction ID : VN7CZA35Y40
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	118.88
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Christopher Simons		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 731 York Ave		Amount 68.40	
City Swarthmore	State PA	Zip Code 19081	Transaction ID : VN7CZA35M32
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Christopher Simons		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 731 York Ave		Amount 68.40	
City Swarthmore	State PA	Zip Code 19081	Transaction ID : VN7CZA35N43
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jordan Sims		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36MS3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jordan Sims		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36PB6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
			2016

Full Name (Last, First, Middle Initial) of Payee Jordan Sims		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36QX1
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
			2016

Full Name (Last, First, Middle Initial) of Payee Jordan Sims		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36SF4
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
			2016

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kareem Smallwood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7657 Brentwood Rd		Amount 21.38	
City Philadelphia	State PA	Zip Code 19151-2022	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35MC3

Full Name (Last, First, Middle Initial) of Payee Kareem Smallwood		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7657 Brentwood Rd		Amount 21.38	
City Philadelphia	State PA	Zip Code 19151-2022	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35ND4

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36KW4

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.96
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36NE9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36Q02
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36RJ7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Felicia Smith		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36MA4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Felicia Smith		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36NW7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Felicia Smith		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36QE2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Felicia Smith		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36S05
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2016	

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36M47
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2016	

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36NP0
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2016	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36Q85
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		434889.86	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36RT8
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		434889.86	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Yasin Southall		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA36MD8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		648181.85	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Yasin Southall		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36NZ1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Yasin Southall		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36QH6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Yasin Southall		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36S39
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Speedway 0006984		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1470 US 70 Hwy W		Amount 5.47	
City Garner	State NC	Zip Code 27529-2552	
Transaction ID : VN7CZA36XE5			
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Speedway 0006984		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1470 US 70 Hwy W		Amount 5.47	
City Garner	State NC	Zip Code 27529-2552	
Transaction ID : VN7CZA36XS2			
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Speedway 0006984		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1470 US 70 Hwy W		Amount 5.47	
City Garner	State NC	Zip Code 27529-2552	
Transaction ID : VN7CZA36YT3			
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.41
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Speedway 0006984		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1470 US 70 Hwy W		Amount 5.47	
City Garner	State NC	Zip Code 27529-2552	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA36Z57
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1626 W 5th Ave		Amount 11.95	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA35RJ0
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1626 W 5th Ave		Amount 12.00	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA35RK8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.42
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1626 W 5th Ave		Amount 15.00	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA35RM6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1626 W 5th Ave		Amount 20.00	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA35RN4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1626 W 5th Ave		Amount 11.95	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA35RW9
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 434889.86		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	46.95
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1626 W 5th Ave		Amount 12.00	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA35RX7
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1626 W 5th Ave		Amount 15.00	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA35RY5
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1626 W 5th Ave		Amount 20.00	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA35RZ3
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	47.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Marcus Spencer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7241 Ogontz Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-1303	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35KW7

Full Name (Last, First, Middle Initial) of Payee Marcus Spencer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 7241 Ogontz Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-1303	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35MX8

Full Name (Last, First, Middle Initial) of Payee Whitney Spitzer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1909 Williams Manor Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32811-4130	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36GY3

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Whitney Spitzer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1909 Williams Manor Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32811-4130	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36JG6

Full Name (Last, First, Middle Initial) of Payee Kristy Steele		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1404 Larchmont Rd		Amount 68.40	
City Cleveland	State OH	Zip Code 44110-2814	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35GK9

Full Name (Last, First, Middle Initial) of Payee Kristy Steele		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1404 Larchmont Rd		Amount 68.40	
City Cleveland	State OH	Zip Code 44110-2814	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35HZ7

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Anjol Stevens		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3941 Eastbury Rd		Amount 68.40	
City South Euclid	State OH	Zip Code 44118	Transaction ID : VN7CZA35G19
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Anjol Stevens		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3941 Eastbury Rd		Amount 68.40	
City South Euclid	State OH	Zip Code 44118	Transaction ID : VN7CZA35HD5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Anthony Stewart		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6400 Lee Rd S		Amount 55.86	
City Cleveland	State OH	Zip Code 44137-4541	Transaction ID : VN7CZA35H10
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	192.66
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Anthony Stewart		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6400 Lee Rd S		Amount 55.86	
City Cleveland	State OH	Zip Code 44137-4541	Transaction ID : VN7CZA35JD8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		434889.86	

Full Name (Last, First, Middle Initial) of Payee Katie Suggs		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1962 Spring St		Amount 47.06	
City Winter Park	State FL	Zip Code 32792-1721	Transaction ID : VN7CZA36H40
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		5628.98	

Full Name (Last, First, Middle Initial) of Payee Katie Suggs		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1962 Spring St		Amount 47.06	
City Winter Park	State FL	Zip Code 32792-1721	Transaction ID : VN7CZA36JP3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	149.98
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kevin Surface		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36MT1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Surface		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36PC4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Surface		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36QY9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Kevin Surface		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36SG2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Sweeney		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2528 Jay Ave # C		Amount 68.40	
City Cleveland	State OH	Zip Code 44113-3072	Transaction ID : VN7CZA35G41
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Sweeney		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2528 Jay Ave # C		Amount 68.40	
City Cleveland	State OH	Zip Code 44113-3072	Transaction ID : VN7CZA35HG9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Leon Taylor		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 597 Stanley Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43206-2418	Transaction ID : VN7CZA35PZ7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Leon Taylor		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 597 Stanley Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43206-2418	Transaction ID : VN7CZA35R57
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Telian		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15224-1776	Transaction ID : VN7CZA35V02
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	159.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Telian		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15224-1776	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35W39

Full Name (Last, First, Middle Initial) of Payee Michael Telian		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15224-1776	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35X55

Full Name (Last, First, Middle Initial) of Payee Michael Telian		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15224-1776	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35Y74

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Helena Thesing		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 109 Keith Ct		Amount 34.20	
City Winter Springs	State FL	Zip Code 32708-2479	Transaction ID : VN7CZA36GC1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 5628.98			

Full Name (Last, First, Middle Initial) of Payee Helena Thesing		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 109 Keith Ct		Amount 34.20	
City Winter Springs	State FL	Zip Code 32708-2479	Transaction ID : VN7CZA36HZ4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 648181.85			

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1701 Sterling Rd		Amount 22.80	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA36VJ3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 33651.35			

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1701 Sterling Rd		Amount 22.80	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA36VX8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		33651.35	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1701 Sterling Rd		Amount 22.80	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA36WY9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1701 Sterling Rd		Amount 22.80	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA36X95
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		648181.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA36ZJ0
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA36ZQ0
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA37068
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA370B8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Rodney Thomas		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 302 W Nedro Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1833	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35M16
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Rodney Thomas		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 302 W Nedro Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1833	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35N27
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	140.97
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jarrett Thompson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2352 Woodcrest Dr		Amount 47.06	
City Winter Park	State FL	Zip Code 32792-5421	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jarrett Thompson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2352 Woodcrest Dr		Amount 47.06	
City Winter Park	State FL	Zip Code 32792-5421	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	128.32
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36NF6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36Q19
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36RK4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3250 Rider Trl S		Amount 34.20	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA36VC6
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3250 Rider Trl S		Amount 34.20	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA36VQ2
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3250 Rider Trl S		Amount 34.20	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA36WR1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3250 Rider Trl S		Amount 34.20	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA36X38
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3250 Rider Trl S		Amount 4.17	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA36ZE9
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3250 Rider Trl S		Amount 4.17	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA36ZK8
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	42.54
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3250 Rider Trl S		Amount 4.17	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA37027

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3250 Rider Trl S		Amount 4.17	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA37076

Full Name (Last, First, Middle Initial) of Payee Ali Totten		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2091 Creekview Ct Apt C		Amount 68.40	
City Reynoldsburg	State OH	Zip Code 43068-4253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		648181.85	

Transaction ID : VN7CZA35PB1

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.74
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Ali Totten		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2091 Creekview Ct Apt C		Amount 68.40	
City Reynoldsburg	State OH	Zip Code 43068-4253	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35QH9	

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36KY9	

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36NG4	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36Q27
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36RM2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Courtney Troup		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4106 Howley St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15224-1419	Transaction ID : VN7CZA35TV3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Courtney Troup		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4106 Howley St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15224-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35VY9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Courtney Troup		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4106 Howley St		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15224-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35X06
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Courtney Troup		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4106 Howley St		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15224-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35Y24
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Christina Tull		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 91 Kittanning Pike		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15215-1345	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35V28
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Christina Tull		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 91 Kittanning Pike		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15215-1345	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35W54
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Christina Tull		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 91 Kittanning Pike		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15215-1345	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35X71
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 126851.89		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Christina Tull		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 91 Kittanning Pike		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15215-1345	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA35Y90

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36MM3

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA36P66

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36QR1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA36SA4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Keith Turner		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1754 Lee Rd		Amount 68.40	
City Cleveland Hts	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA35G75
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Keith Turner		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1754 Lee Rd		Amount 68.40	
City Cleveland Hts	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA35HK2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Robert Ulmer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 726 Marlyn Rd		Amount 68.40	
City Philadelphia	State PA	Zip Code 19151-3825	Transaction ID : VN7CZA35KY3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Robert Ulmer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 726 Marlyn Rd		Amount 68.40	
City Philadelphia	State PA	Zip Code 19151-3825	Transaction ID : VN7CZA35MZ3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shuntell Ulmer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA36MJ7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shuntell Ulmer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA36P40
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shuntell Ulmer		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA36QP5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shuntell Ulmer		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA36S88	

Full Name (Last, First, Middle Initial) of Payee Jesse Umoette		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2436 Winding Hills Ct		Amount 68.40	
City Columbus	State OH	Zip Code 43224-3018	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35PW3	

Full Name (Last, First, Middle Initial) of Payee Jesse Umoette		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2436 Winding Hills Ct		Amount 68.40	
City Columbus	State OH	Zip Code 43224-3018	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA35R24	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	171.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.25	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA36DW1
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.25	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA36E60
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.00	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA36F47
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.00	
City Chicago	State IL	Zip Code 60623-1893	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36FE4

Full Name (Last, First, Middle Initial) of Payee Andy Vazquez		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 829 Glastonbury Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34758-2607	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36G30

Full Name (Last, First, Middle Initial) of Payee Andy Vazquez		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 829 Glastonbury Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34758-2607	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA36HP3

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Tracy Vazquez		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 829 Glastonbury Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34758-2607	Transaction ID : VN7CZA36G22
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tracy Vazquez		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 829 Glastonbury Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34758-2607	Transaction ID : VN7CZA36HN5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Roberto Velazquez		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 108 Puelba Ln		Amount 34.20	
City Kissimmee	State FL	Zip Code 34743-9218	Transaction ID : VN7CZA36FT9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Roberto Velazquez		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 108 Puelba Ln		Amount 34.20	
City Kissimmee	State FL	Zip Code 34743-9218	Transaction ID : VN7CZA36HD1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee AnnMarie Viehweger		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4841 Ute St		Amount 34.20	
City Orlando	State FL	Zip Code 32819-8452	Transaction ID : VN7CZA36FW4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee AnnMarie Viehweger		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4841 Ute St		Amount 34.20	
City Orlando	State FL	Zip Code 32819-8452	Transaction ID : VN7CZA36HF7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 307 W 6th St		Amount 7.50	
City Royal Oak	State MI	Zip Code 48067-2548	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA36ZF6
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 307 W 6th St		Amount 7.50	
City Royal Oak	State MI	Zip Code 48067-2548	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA36ZM6
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 33651.35		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 307 W 6th St		Amount 7.50	
City Royal Oak	State MI	Zip Code 48067-2548	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA37034
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	22.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 307 W 6th St		Amount 7.50	
City Royal Oak	State MI	Zip Code 48067-2548	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA37084
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Darnell Walker		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1990 Ford Dr		Amount 68.40	
City Cleveland	State OH	Zip Code 44106-3900	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35H36
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 648181.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Darnell Walker		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1990 Ford Dr		Amount 68.40	
City Cleveland	State OH	Zip Code 44106-3900	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA35JF3
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 434889.86		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	144.30
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Alexander Walsh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 100 McEntee St Apt 2		Amount 68.40	
City Kingston	State NY	Zip Code 12401-5956	Transaction ID : VN7CZA35KQ7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Alexander Walsh		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 100 McEntee St Apt 2		Amount 68.40	
City Kingston	State NY	Zip Code 12401-5956	Transaction ID : VN7CZA35MR8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Domonique Walters		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1710 W 16th St		Amount 34.20	
City Sanford	State FL	Zip Code 32771-3107	Transaction ID : VN7CZA36GM4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Domonique Walters		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1710 W 16th St		Amount 34.20	
City Sanford	State FL	Zip Code 32771-3107	Transaction ID : VN7CZA36J77
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shante Washington		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12009 Saywell Ave		Amount 55.86	
City Cleveland	State OH	Zip Code 44108-3834	Transaction ID : VN7CZA35H52
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shante Washington		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 12009 Saywell Ave		Amount 55.86	
City Cleveland	State OH	Zip Code 44108-3834	Transaction ID : VN7CZA35JH9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	145.92
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 26.42	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA370R0

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 26.42	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA371A3

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 26.42	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA37307

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.26
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 26.42	
City Saint Louis	State MO	Zip Code 63115-2031	Transaction ID : VN7CZA373J9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2031	Transaction ID : VN7CZA375A0
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2031	Transaction ID : VN7CZA375D3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	34.76
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2031	Transaction ID : VN7CZA375P5
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2031	Transaction ID : VN7CZA375S8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Suphie Wesner		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 3046 Woodbury Rd		Amount 68.40	
City Shaker Hts	State OH	Zip Code 44120-2441	Transaction ID : VN7CZA35GV3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.74
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Suphie Wesner		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 3046 Woodbury Rd		Amount 68.40	
City Shaker Hts	State OH	Zip Code 44120-2441	Transaction ID : VN7CZA35J70
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee West Market Family Fare		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4700 W Market St		Amount 3.09	
City Greensboro	State NC	Zip Code 27407-1234	Transaction ID : VN7CZA3732Z
Purpose of Expenditure Gas	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee West Market Family Fare		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 4700 W Market St		Amount 3.09	
City Greensboro	State NC	Zip Code 27407-1234	Transaction ID : VN7CZA37475
Purpose of Expenditure Gas	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.58
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee West Market Family Fare		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 4700 W Market St		Amount 3.09	
City Greensboro	State NC	Zip Code 27407-1234	Transaction ID : VN7CZA374Z5
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee West Market Family Fare		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 4700 W Market St		Amount 3.09	
City Greensboro	State NC	Zip Code 27407-1234	Transaction ID : VN7CZA37578
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 335 Crawford Rd		Amount 4.25	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA36DZ4
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	10.43
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 335 Crawford Rd		Amount 4.25	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA36E93
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33651.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 335 Crawford Rd		Amount 4.00	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA36F70
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 335 Crawford Rd		Amount 4.00	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA36FH7
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.25
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Latasha Wilkins		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2700 Herdon Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704	Transaction ID : VN7CZA360G9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 33651.35			

Full Name (Last, First, Middle Initial) of Payee Latasha Wilkins		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2700 Herdon Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704	Transaction ID : VN7CZA36196
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 33651.35			

Full Name (Last, First, Middle Initial) of Payee Latasha Wilkins		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2700 Herdon Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704	Transaction ID : VN7CZA363K9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 648181.85			

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Latasha Wilkins		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2700 Herdon Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704	
Transaction ID : VN7CZA364B8			
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Octavion Wilson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2665 E Juliet Dr		Amount 34.20	
City Deltona	State FL	Zip Code 32738-2435	
Transaction ID : VN7CZA36H90			
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5628.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Octavion Wilson		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 2665 E Juliet Dr		Amount 34.20	
City Deltona	State FL	Zip Code 32738-2435	
Transaction ID : VN7CZA36JV3			
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Brian Wimbley		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 13805 Argus Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44110-2115	Transaction ID : VN7CZA35H44
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brian Wimbley		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 13805 Argus Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44110-2115	Transaction ID : VN7CZA35JG1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 434889.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA35NE2
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	191.30
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA35NM9
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA35NN7
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA35NV5
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	163.50
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Paul Woodlyn, Jr.		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6066 Regent St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19142-1436	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35KM4

Full Name (Last, First, Middle Initial) of Payee Paul Woodlyn, Jr.		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 6066 Regent St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19142-1436	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35MN4

Full Name (Last, First, Middle Initial) of Payee Jennifer Zokaite		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15229-1825	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35TP3

(a) SUBTOTAL of Itemized Independent Expenditures.....	182.40
(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)  
Working America

Full Name (Last, First, Middle Initial) of Payee Jennifer Zokaite		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15229-1825	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 648181.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35VS0

Full Name (Last, First, Middle Initial) of Payee Jennifer Zokaite		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 22.80	
City Pittsburgh	State PA	Zip Code 15229-1825	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35WW4

Full Name (Last, First, Middle Initial) of Payee Jennifer Zokaite		Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 45.60	
City Pittsburgh	State PA	Zip Code 15229-1825	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126851.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA35XY3

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	127084.45