

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 CASE ACTION FUND	
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2401 N. CENTRAL AVE., Suite 120	
(c) City, State and ZIP Code Phoenix, AZ 85004	
2. Occupation and Name of Employer (for Individual Filers Only)	3. FEC Identification Number C90016029

4. TYPE OF REPORT (check appropriate boxes):

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

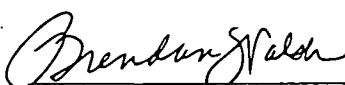
b) Is this Report an amendment? No Yes, it amends the report filed on _____

5. COVERING PERIOD: FROM **11 07 2016**
THROUGH **11 10 2016**

6. TOTAL CONTRIBUTIONS

7. TOTAL INDEPENDENT EXPENDITURES **776.07**

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
Brendan Walsh		11/17/16

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 52 U.S.C. §30109.

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

20161117 10:00:00 AM

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

PAGE 1 OF 1

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

NAME OF FILER (In Full)
CASE ACTION FUND

A. Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			MM / DD / YYYY
City	State	Zip Code	
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period
C			
Name of Employer		Occupation	

B. Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			MM / DD / YYYY
City	State	Zip Code	
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period
C			
Name of Employer		Occupation	

C. Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			MM / DD / YYYY
City	State	Zip Code	
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period
C			
Name of Employer		Occupation	

D. Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			MM / DD / YYYY
City	State	Zip Code	
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period
C			
Name of Employer		Occupation	

SUBTOTAL of Receipts This Page (optional)	▶	
TOTAL This Period (last page carry total to Line 6)	▶	

NON-FINANCIAL DISCLOSURE

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CHASE Action Fund

Full Name (Last, First, Middle Initial) of Payee EINSTEIN BAEIS		Date of Public Distribution/Dissemination 11 07 2016	
Mailing Address 530 E. McDowell Road		Amount 1.45	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Food/Refreshments	Category/Type EVN	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,057.45		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SARWAN		Date of Public Distribution/Dissemination 11 08 2016	
Mailing Address 310 E. McDowell Road		Amount 5.00	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Food/Refreshments	Category/Type EVN	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,062.45		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee MIDDLE EASTERN BAKERY		Date of Public Distribution/Dissemination 11 08 2016	
Mailing Address 3052 N. 16th Street		Amount 7.21	
City Phoenix	State AZ	Zip Code 85016	
Purpose of Expenditure Food/Refreshments	Category/Type EVN	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,069.66		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	13.66
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶ (carry total from last page forward to Line 7)	

NON-FINANCIAL INFORMATION

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE Action Fund

Full Name (Last, First, Middle Initial) of Payee STAPLES		Date of Public Distribution/Dissemination 11 08 2016	
Mailing Address 106 N OBBERN ROAD		Amount 2.86	
City Phoenix	State AZ	Zip Code 85015	
Purpose of Expenditure Decorations/Supplies	Category/Type EVN	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,072.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee STAPLES		Date of Public Distribution/Dissemination 11 07 2016	
Mailing Address 3446 W. Camelback Road		Amount 56.67	
City Phoenix	State AZ	Zip Code 85017	
Purpose of Expenditure Food / Refreshments	Category/Type EVN	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,129.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee COSTCO		Date of Public Distribution/Dissemination 11 07 2016	
Mailing Address 1646 W. Montebello		Amount 15.67	
City Phoenix	State AZ	Zip Code 85015	
Purpose of Expenditure Food / Refreshments	Category/Type EVN	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,144.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	75.20
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

20161212 10:00 AM

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE Action Fund

Full Name (Last, First, Middle Initial) of Payee SARWAN		Date of Public Distribution/Dissemination 11 07 2016	
Mailing Address 340 E. McDowell Road		Amount 3.62	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Food / Refreshments	Category/Type EVN	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,148.47		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Le Canosta		Date of Public Distribution/Dissemination 11 07 2016	
Mailing Address 1733 N. VAN BUREN STREET		Amount 82.81	
City Phoenix	State AZ	Zip Code 85507	
Purpose of Expenditure Food / Refreshments	Category/Type EVN	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,180.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee STARBUCKS		Date of Public Distribution/Dissemination 11 07 2016	
Mailing Address 530 E. McDowell Rd., Suite 109		Amount 4.33	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Food / Refreshments	Category/Type EVN	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,185.11		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	40.26
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

20161207 09:00 AM

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

CASE Action Fund

Full Name (Last, First, Middle Initial) of Payee

Danielle Wilson

Date of Public Distribution/Dissemination

11 08 2016

Mailing Address

2401 N. CENTRAL AVENUE

Amount

City

Phoenix

State

AZ

Zip Code

85004

14.09

Purpose of Expenditure

Food / Refreshments

Category/
Type

EVN

Office Sought:

- House
 Senate
 President

State: _____

District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

Trump

Check One:

- Support Oppose

Calendar Year-To-Date Per Election
for Office Sought

19,199.20

Disbursement For: Primary General

Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Costco

Date of Public Distribution/Dissemination

11 08 2016

Mailing Address

1646 W. Montebello

Amount

City

Phoenix

State

AZ

Zip Code

85015

12.29

Purpose of Expenditure

Food / Refreshments

Category/
Type

EVN

Office Sought:

- House
 Senate
 President

State: _____

District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

Trump

Check One:

- Support Oppose

Calendar Year-To-Date Per Election
for Office Sought

19,211.47

Disbursement For: Primary General

Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Dunkin' Donuts

Date of Public Distribution/Dissemination

11 08 2016

Mailing Address

2343 W THOMAS ROAD

Amount

City

Phoenix

State

AZ

Zip Code

85045

7.24

Purpose of Expenditure

Food / Refreshments

Category/
Type

EVN

Office Sought:

- House
 Senate
 President

State: _____

District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

Trump

Check One:

- Support Oppose

Calendar Year-To-Date Per Election
for Office Sought

19,218.71

Disbursement For: Primary General

Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	33.60
(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)
CASE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee SARWAY		Date of Public Distribution/Dissemination 11 08 2016	
Mailing Address 340 E. McDowell Road		Amount 20.33	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Food/refreshments	Category/Type EVN	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,239.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee SARWAY		Date of Public Distribution/Dissemination 11 08 2016	
Mailing Address 520 N OSBORN ROAD		Amount 39.91	
City Phoenix	State AZ	Zip Code 85013	
Purpose of Expenditure Food/refreshments	Category/Type EVN	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,278.94		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee MARCELA ORTEGA		Date of Public Distribution/Dissemination 11 10 2016	
Mailing Address 2401 N. CENTRAL AVENUE		Amount 21.88	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure overhead- other	Category/Type ODD	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,300.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	82.12
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶ (carry total from last page forward to Line 7)	

NOT FOR FILING

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Michael Angulo		Date of Public Distribution/Dissemination 11 10 2016	
Mailing Address 2401 N. CENTRAL AVENUE		Amount 25.00	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Employee related expenses - cell phone	Category/Type ADM	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,325.82		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 Angulo		Date of Public Distribution/Dissemination 11 10 2016	
Mailing Address 2401 N. CENTRAL AVENUE		Amount 73.81	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Food / Refreshments	Category/Type EVN	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,399.43		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Michael Angulo		Date of Public Distribution/Dissemination 11 10 2016	
Mailing Address 2401 N. CENTRAL AVENUE		Amount 78.25	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure TRUMP	Category/Type TVL	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP		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.....	177.06
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

20161207 04:00:11

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE Action Fund

Full Name (Last, First, Middle Initial) of Payee Michael Argulo		Date of Public Distribution/Dissemination 11 10 2016	
Mailing Address 2401 N. CENTRAL AVE.		Amount 4.75	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure PARKING	Category/Type TVL	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,482.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee HUGO SOTO		Date of Public Distribution/Dissemination 11 10 2016	
Mailing Address 2401 N. CENTRAL AVENUE		Amount 65.92	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure FUEL	Category/Type TVL	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,548.54		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee HUGO SOTO		Date of Public Distribution/Dissemination 11 10 2016	
Mailing Address 2401 N. CENTRAL AVENUE		Amount 22.50	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Lodging	Category/Type TVL	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,571.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	93.17
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

NOT FOR FILING OR DISTRIBUTION

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE Action Fund

Full Name (Last, First, Middle Initial) of Payee HUGO Soto		Date of Public Distribution/Dissemination 11 10 2016	
Mailing Address 2401 N. Central Avenue		Amount 261.00	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Dental Fee	Category/Type TUL	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19,832.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

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

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: 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 type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	261.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

2016-11-01 10:00:00 AM

Via E-Mail

2016-12-20 10:00:00

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

2016-12-07 03:00:22:00

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery	<input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): <i>VIA E-MAIL</i>	Date of Receipt or Postmarked <i>11/16/16</i>

PREPARER *[Signature]* *12/7/16*
DATE PREPARED
 (3/2015)