

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

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WORKING FOR US POLITICAL ACTION COMMITTEE INC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00430876 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Block by Block			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 21 / 2016</div> </div>		
Mailing Address 888 16th Street NW Suite 650			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">55000.00</div>		
City Washington	State DC	Zip Code 20006	Transaction ID : SE.4675 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 21 / 2016</div> </div>		
Purpose of Expenditure Canvass		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>			
Name of Federal Candidate EDWARDS, DONNA FERN, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD </div> </div>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

1620478.45

Full Name of Payee Switchboard Communications			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 21 / 2016</div> </div>		
Mailing Address 888 16th Street, NW Suite 333			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1356.80</div>		
City Washington	State DC	Zip Code 20006	Transaction ID : SE.4674 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 21 / 2016</div> </div>		
Purpose of Expenditure Telephone Calls - 4/21/2016		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>			
Name of Federal Candidate EDWARDS, DONNA FERN, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD </div> </div>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

1653986.93

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">56356.80</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

Rosenthal, Steven, , ,

[Electronically Filed]

Date

MM / DD / YYYY
04 / 22 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WORKING FOR US POLITICAL ACTION COMMITTEE INC		FEC IDENTIFICATION NUMBER ▼ C C00430876
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee The Strategy Group, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 21 / 2016
Mailing Address 730 N Franklin Suite 404		Amount 9000.00
City Chicago	State IL	Zip Code 60654
Purpose of Expenditure Doorhangers	Category/ Type 004	Transaction ID : SE.4672 Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2016
Name of Federal Candidate EDWARDS, DONNA FERN, ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD
Calendar Year-To-Date Per Election for Office Sought 1652630.13		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee The Strategy Group, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 21 / 2016
Mailing Address 730 N Franklin Suite 404		Amount 23151.68
City Chicago	State IL	Zip Code 60654
Purpose of Expenditure Direct Mail - 4/21/2016	Category/ Type 004	Transaction ID : SE.4673 Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2016
Name of Federal Candidate EDWARDS, DONNA FERN, ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD
Calendar Year-To-Date Per Election for Office Sought 1643630.13		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	32151.68
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	88508.48

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

Rosenthal, Steven, ,

[Electronically Filed]

Date

MM / DD / YYYY
04 / 22 / 2016

Signature