

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

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

Full Name of Payee Autumn Press
Mailing Address 945 Camelia St
City Berkeley State CA Zip Code 94710-1437
Purpose of Expenditure Printing
Name of Federal Candidate Bernie Sanders Support
Calendar Year-To-Date Per Election for Office Sought 8887.31

Date of Public Distribution/Dissemination 12 / 11 / 2015
Amount 5738.56
Transaction ID : D691232
Date of Disbursement or Obligation 12 / 10 / 2015
Office Sought: House District: 00
President Senate State: DC
Disbursement For: Primary General 2016

Full Name of Payee Autumn Press
Mailing Address 945 Camelia St
City Berkeley State CA Zip Code 94710-1437
Purpose of Expenditure Printing
Name of Federal Candidate Bernie Sanders Support
Calendar Year-To-Date Per Election for Office Sought 8887.31

Date of Public Distribution/Dissemination 12 / 11 / 2015
Amount 3148.75
Transaction ID : D691233
Date of Disbursement or Obligation 12 / 10 / 2015
Office Sought: House District: 00
President Senate State: DC
Disbursement For: Primary General 2016

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 8887.31, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 8887.31

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

Signature Carolyn Hietamaki [Electronically Filed] Date 12 / 11 / 2015