

# 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 Opportunity PAC - A Coalition of teachers, health care givers, faculty members, school employees, and public and pr	
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 555 Capitol Mall, Suite 1425	
(c) City, State and ZIP Code Sacramento, CA 95814	3. FEC Identification Number C
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	/	D	D	/	Y	Y	Y	Y
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5. COVERING PERIOD:

FROM M M / D D / Y Y Y Y  
10 29 / 2016

THROUGH M M / D D / Y Y Y Y  
10 29 / 2016

6. TOTAL CONTRIBUTIONS .....	0.00
7. TOTAL INDEPENDENT EXPENDITURES .....	12,364.07

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
Alma Hernandez		10/30/2016

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

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

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1 OF 1  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)  
Opportunity PAC - A Coalition of teachers, health care givers, faculty members, school employees, and public and private emp

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

Date of Public Distribution/Dissemination

MM / DD / YYYY  
10 / 29 / 2016

Mailing Address

730 North Franklin Street

Amount

10,591.75

City State Zip Code

Chicago, IL 60654

Purpose of Expenditure

Category/Type 24E

Office Sought:  House State: CA  
 Senate  
 President District: \_\_\_\_\_

Mailer

Check One:  Support  Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Hillary Clinton

Disbursement For:  Primary  General 16  
 Other (specify) \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought 10,591.75

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

Date of Public Distribution/Dissemination

MM / DD / YYYY  
10 / 29 / 2016

Mailing Address

730 North Franklin Street

Amount

1,772.32

City State Zip Code

Chicago, IL 60654

Purpose of Expenditure

Category/Type 24E

Office Sought:  House State: CA  
 Senate District: 19  
 President

Mailer

Check One:  Support  Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Zoe Lofgren

Disbursement For:  Primary  General 16  
 Other (specify) \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought 1,772.32

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

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

City State Zip Code

Amount

Purpose of Expenditure

Category/Type

Office Sought:  House State: \_\_\_\_\_  
 Senate District: \_\_\_\_\_  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought

Disbursement For:  Primary  General  
 Other (specify) \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures ..... 12,364.07

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures ..... 12,364.07  
(carry total from last page forward to Line 7)

**Via E-Mail**

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.

<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>E-Mail</i>	Date of Receipt or Postmarked
	<i>10/30/16</i>

*[Signature]* PREPARER *10/31/16*  
DATE PREPARED