

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

WORKING FOR US POLITICAL ACTION COMMITTEE INC

ADDRESS (number and street)

1725 I Street, NW

Suite 900

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20006

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00430876

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☒ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
04 07 2016

through

M M M / D D D / Y Y Y Y Y Y
06 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Steven Rosenthal

Signature of Treasurer

Steven Rosenthal

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
07 08 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.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

WORKING FOR US POLITICAL ACTION COMMITTEE INC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 07 2016 To: M M / D D / Y Y Y Y Y Y
06 30 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		73748.94
(b) Cash on Hand at Beginning of Reporting Period.....	191031.74	
(c) Total Receipts (from Line 19)	635000.00	1735000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	826031.74	1808748.94
7. Total Disbursements (from Line 31)	735355.53	1718072.73
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	90676.21	90676.21
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

WORKING FOR US POLITICAL ACTION COMMITTEE INC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		0	7		2	0	1	6		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		3	0		2	0	1	6		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	635000.00	1235000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	635000.00	1235000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	500000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ►	635000.00	1735000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ►	635000.00	1735000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ►	635000.00	1735000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	48995.80	49085.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	48995.80	49085.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	686359.73	1668986.93
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	735355.53	1718072.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	735355.53	1718072.73

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	635000.00	1735000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	635000.00	1735000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	48995.80	49085.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	48995.80	49085.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 17

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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 COMMITTEE (In Full)

WORKING FOR US POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)

A. Patricia Bauman

Mailing Address 2358 Massachusetts Avenue, NW

City State Zip Code
 Washington DC 20009

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Bauman Foundation

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

04 / 11 / 2016

Transaction ID : SA11AI.4680

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Contribution

Full Name (Last, First, Middle Initial)

B. Patricia Bauman

Mailing Address 2358 Massachusetts Avenue, NW

City State Zip Code
 Washington DC 20009

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Bauman Foundation

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

105000.00

Date of Receipt

04 / 20 / 2016

Transaction ID : SA11AI.4682

Amount of Each Receipt this Period

55000.00

☐ Memo Item

Contribution

Full Name (Last, First, Middle Initial)

C. Dr. Kathleen Maloy, Ph.D.

Mailing Address 7 Pinehurst Court

City State Zip Code
 Chevy Chase MD 20815

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

05 / 09 / 2016

Transaction ID : SA11AI.4683

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 17

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WORKING FOR US POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)

A. S. Sonjia Smith

Mailing Address 815 Broomley Road

City State Zip Code
 Charlottesville VA 22901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 20 / 2016

Transaction ID : SA11AI.4685

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Contribution

Full Name (Last, First, Middle Initial)

B. S. Donald Sussman

Mailing Address 138 Turner Farm Road

City State Zip Code
 North Haven ME 04853

FEC ID number of contributing
federal political committee.

C

Name of Employer

Trust Asset Management

Occupation

Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 14 / 2016

Transaction ID : SA11AI.4679

Amount of Each Receipt this Period

500000.00

☐ Memo Item

Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

520000.00

TOTAL This Period (last page this line number only)..... ►

635000.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

WORKING FOR US POLITICAL ACTION COMMITTEE INC

20.00

 Memo Item

MM / DD / YYYY

Age Group	Percentage
18-24	18.00
25-34	15.00
35-44	12.00
45-54	10.00
55-64	8.00
65-74	6.00
75-84	4.00
85+	2.00

 Memo Item

340.00

 Memo Item

State: District:

380.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WORKING FOR US POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)

A. The Organizing Group, Inc.Mailing Address 888 16th Street, NW
Suite 333

City Washington State DC Zip Code 20006

Purpose of Disbursement
Strategic Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 17 / 2016**Transaction ID : SB21B.4687**

Amount of Each Disbursement this Period

30000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Utrecht Kleinfeld Fiori Zeglis & PartnersMailing Address 1900 M Street, NW
Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 29 / 2016**Transaction ID : SB21B.4691**

Amount of Each Disbursement this Period

2364.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Utrecht Kleinfeld Fiori Zeglis & PartnersMailing Address 1900 M Street, NW
Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 24 / 2016**Transaction ID : SB21B.4688**

Amount of Each Disbursement this Period

6141.80

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38505.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 17

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WORKING FOR US POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)

A. White Horse Strategies

Mailing Address 3 Vreeland Court

City East Brunswick State NJ Zip Code 08816

Purpose of Disbursement
Strategic Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016**Transaction ID : SB21B.4693**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10000.00

48885.80

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 11 OF 17

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

WORKING FOR US POLITICAL ACTION COMMITTEE INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Greenberg Quinlan Rosner Research

Nature of Debt (Purpose):

Polling

Mailing Address 10 G Street, NE
Suite 500City State Zip Code
Washington DC 20002

Outstanding Balance Beginning This Period

1800.00

Transaction ID : SD10.4272

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SD10

Transaction ID : SD10.4272

(Current loan amount of 1800.00 from a balance of 1800.00 has been forgiven)

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 13 OF 17
 FOR LINE 24 OF FORM 3X

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

Full Name of Payee Block by Block		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 21 / 2016	
Mailing Address 888 16th Street NW Suite 650			Amount 55000.00	
City Washington	State DC	Zip Code 20006	Transaction ID : SE.4666	
Purpose of Expenditure Canvass	Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2016	
Name of Federal Candidate DONNA FERN EDWARDS		<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		1605478.45	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Mundy Katowitz Media, Inc.		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 15 / 2016	
Mailing Address 1322 G Street, SE			Amount 539974.30	
City Washington	State DC	Zip Code 20003	Transaction ID : SE.4659	
Purpose of Expenditure TV Media - 'Deal'	Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 15 / 2016	
Name of Federal Candidate DONNA FERN EDWARDS		<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		1545478.45	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	594974.30
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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.

Steven Rosenthal

[Electronically Filed]

Date

MM / DD / YYYY
07 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 14 OF 17
 FOR LINE 24 OF FORM 3X

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

Full Name of Payee Mundy Katowitz Media, Inc.		<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 04 / 15 / 2016 </div>	
Mailing Address 1322 G Street, SE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5000.00</div>	
City Washington	State DC	Zip Code 20003	Transaction ID : SE.4661
Purpose of Expenditure TV Production - 'Deal'	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY 04 / 15 / 2016</div>
Name of Federal Candidate DONNA FERN EDWARDS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MD	
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) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">1550478.45</div>			

Full Name of Payee Switchboard Communications		<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 04 / 12 / 2016 </div>	
Mailing Address 888 16th Street, NW Suite 333		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">15000.00</div>	
City Washington	State DC	Zip Code 20006	Transaction ID : SE.4642
Purpose of Expenditure Digital Advertisements - 04/12/2016	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY 04 / 12 / 2016</div>
Name of Federal Candidate DONNA FERN EDWARDS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MD	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">15000.00</div>			

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">20000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></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.

Steven Rosenthal

[Electronically Filed]

Date

MM / DD / YYYY
 07 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 15 OF 17
 FOR LINE 24 OF FORM 3X

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

Full Name of Payee Switchboard Communications		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 21 / 2016
Mailing Address 888 16th Street, NW Suite 333			Amount 1356.80
City Washington	State DC	Zip Code 20006	Transaction ID : SE.4670
Purpose of Expenditure Telephone Calls - 4/21/2016	Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2016
Name of Federal Candidate DONNA FERN EDWARDS		<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		1638986.93	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Switchboard Communications		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 26 / 2016
Mailing Address 888 16th Street, NW Suite 333			Amount 15000.00
City Washington	State DC	Zip Code 20006	Transaction ID : SE.4676
Purpose of Expenditure GOTV Telephone Calls - 04/26/2016	Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 26 / 2016
Name of Federal Candidate DONNA FERN EDWARDS		<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		1653986.93	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	16356.80
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Steven Rosenthal

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 16 OF 17
 FOR LINE 24 OF FORM 3X

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

Full Name of Payee The Strategy Group, Inc.		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 12 / 2016	
Mailing Address 730 N Franklin Suite 404			Amount 22876.95	
City Chicago	State IL	Zip Code 60654	Transaction ID : SE.4619	
Purpose of Expenditure Direct Mail - 4/12/2016		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 13 / 2016	
Name of Federal Candidate DONNA FERN EDWARDS		<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: <u>MD</u>	
Calendar Year-To-Date Per Election for Office Sought		1005504.15	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.		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 21 / 2016	
Mailing Address 730 N Franklin Suite 404			Amount 23151.68	
City Chicago	State IL	Zip Code 60654	Transaction ID : SE.4667	
Purpose of Expenditure Direct Mail - 4/21/2016		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 21 / 2016	
Name of Federal Candidate DONNA FERN EDWARDS		<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: <u>MD</u>	
Calendar Year-To-Date Per Election for Office Sought		1628630.13	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	46028.63
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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.

Steven Rosenthal

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 07 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 17 OF 17
 FOR LINE 24 OF FORM 3X

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

Full Name of Payee The Strategy Group, Inc.		<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 21 / 2016</div> </div>	
Mailing Address 730 N Franklin Suite 404		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">9000.00</div>	
City Chicago	State IL	Zip Code 60654	Transaction ID : SE.4669
Purpose of Expenditure Doorhangers	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2016	
Name of Federal Candidate DONNA FERN EDWARDS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MD	
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) ► _____	

1637630.13

Full Name of Payee		<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> </div>	
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type	MM / DD / YYYY	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: _____	
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..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">9000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">686359.73</div>

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Steven Rosenthal

[Electronically Filed]

Date

MM / DD / YYYY
07 / 08 / 2016

Signature