

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 Working America		3. FEC Identification Number C C90011156
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 815 16th St. NW		
(c) City, State and ZIP Code Washington DC 20006		
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 / /

5. COVERING PERIOD:
 FROM / /
 THROUGH / /

6. TOTAL CONTRIBUTIONS.....
 7. 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 any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Mr. James Cobb Jr.	<i>Mr. James Cobb Jr.</i>	09/09/2016
	<i>[Electronically Filed]</i>	

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

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

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)
Working America

A. Full Name (Last, First, Middle Initial) For Our Future			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 31 / 2016		
Mailing Address PO Box 65279			Transaction ID : VN8C7EY84S2		
City Washington	State DC	Zip Code 20035-5279	Amount of Each Receipt this Period 360750.00		
FEC ID number of contributing federal political committee.			C C00620971		
Name of Employer			Occupation		

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

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

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

SUBTOTAL of Receipts This Page (optional)	360750.00
TOTAL This Period (last page carry total to Line 6)	360750.00

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA2TEY7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		9506.60	

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA2TFW2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		9506.60	

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA2TJP0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		50153.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA2TKM7
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Pedro Acosta		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3827 N Franklin St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19140-3228	Transaction ID : VN7CZA2SWM8
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Pedro Acosta		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3827 N Franklin St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19140-3228	Transaction ID : VN7CZA2SXD5
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Pedro Acosta		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3827 N Franklin St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19140-3228	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		97855.02	

Full Name (Last, First, Middle Initial) of Payee Pedro Acosta		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3827 N Franklin St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19140-3228	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		97855.02	

Full Name (Last, First, Middle Initial) of Payee Stefan Adams		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2746 Atwood Ter		Amount 34.20	
City Columbus	State OH	Zip Code 43211-1108	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Stefan Adams		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2746 Atwood Ter		Amount 34.20	
City Columbus	State OH	Zip Code 43211-1108	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TAT6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Stefan Adams		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2746 Atwood Ter		Amount 34.20	
City Columbus	State OH	Zip Code 43211-1108	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TBY9
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		357210.83	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Stefan Adams		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2746 Atwood Ter		Amount 34.20	
City Columbus	State OH	Zip Code 43211-1108	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TD23
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		357210.83	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Noah Alloy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 973 Mount Vernon Ave Apt A		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1573	Transaction ID : VN7CZA2T9Q0
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Noah Alloy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 973 Mount Vernon Ave Apt A		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1573	Transaction ID : VN7CZA2TAW2
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Noah Alloy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 973 Mount Vernon Ave Apt A		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1573	Transaction ID : VN7CZA2TC05
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Noah Alloy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 973 Mount Vernon Ave Apt A		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1573	Transaction ID : VN7CZA2TD49
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ryan Anders		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1954 Amato Dr		Amount 34.20	
City North Versailles	State PA	Zip Code 15137-2735	Transaction ID : VN7CZA2T4X7
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ryan Anders		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1954 Amato Dr		Amount 34.20	
City North Versailles	State PA	Zip Code 15137-2735	Transaction ID : VN7CZA2T5W0
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Ryan Anders		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1954 Amato Dr		Amount 34.20	
City North Versailles	State PA	Zip Code 15137-2735	Transaction ID : VN7CZA2T6T7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ryan Anders		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1954 Amato Dr		Amount 34.20	
City North Versailles	State PA	Zip Code 15137-2735	Transaction ID : VN7CZA2T7Q6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Anderson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 714 Watt Ln		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15219-4218	Transaction ID : VN7CZA2T550
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee John Anderson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 714 Watt Ln		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15219-4218	Transaction ID : VN7CZA2T643
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Anderson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 714 Watt Ln		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15219-4218	Transaction ID : VN7CZA2T712
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Anderson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 714 Watt Ln		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15219-4218	Transaction ID : VN7CZA2T7Y2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Angela Oliver		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 47515 S Vincennes Ave Apt 2		Amount 72.67	
City Chicago	State IL	Zip Code 60643	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 32483.71		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2SJV4

Full Name (Last, First, Middle Initial) of Payee Angela Oliver		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 47515 S Vincennes Ave Apt 2		Amount 72.67	
City Chicago	State IL	Zip Code 60643	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 32483.71		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2SK50

Full Name (Last, First, Middle Initial) of Payee Carlos Badaraco		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 34.20	
City Orlando	State FL	Zip Code 32835-7062	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2V4W6

(a) SUBTOTAL of Itemized Independent Expenditures.....	179.54
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Carlos Badaraco		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 34.20	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA2V618
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jordan Bailey		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 435 S Braddock Ave Apt 1		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-3214	Transaction ID : VN7CZA2T4P2
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jordan Bailey		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 435 S Braddock Ave Apt 1		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-3214	Transaction ID : VN7CZA2T5N5
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jordan Bailley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 435 S Braddock Ave Apt 1		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-3214	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T6K2
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jordan Bailley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 435 S Braddock Ave Apt 1		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-3214	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T7G1
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Barefoot Press, Inc.		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 731 Pershing Rd		Amount 312.82	
City Raleigh	State NC	Zip Code 27608-2711	
Purpose of Expenditure Printing		Category/ Type	Transaction ID : VN7CZA2TWA7
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	381.22
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Barefoot Press, Inc.		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 731 Pershing Rd		Amount 312.82	
City Raleigh	State NC	Zip Code 27608-2711	Transaction ID : VN7CZA2TWB5
Purpose of Expenditure Printing	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Barefoot Press, Inc.		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 731 Pershing Rd		Amount 312.82	
City Raleigh	State NC	Zip Code 27608-2711	Transaction ID : VN7CZA2TWD1
Purpose of Expenditure Printing	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Barefoot Press, Inc.		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 731 Pershing Rd		Amount 312.82	
City Raleigh	State NC	Zip Code 27608-2711	Transaction ID : VN7CZA2TWE9
Purpose of Expenditure Printing	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	938.46
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Andrea Barrow		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4088 Suffolk Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44121-2357	Transaction ID : VN7CZA2SN48
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Andrea Barrow		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4088 Suffolk Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44121-2357	Transaction ID : VN7CZA2SPN3
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Andrea Barrow		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4088 Suffolk Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44121-2357	Transaction ID : VN7CZA2SR60
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Andrea Barrow		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4088 Suffolk Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44121-2357	Transaction ID : VN7CZA2SSQ5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Barbara Battle		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7325 Beacon Hill Loop Apt 5		Amount 34.20	
City Orlando	State FL	Zip Code 32818-6426	Transaction ID : VN7CZA2V4T2
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Barbara Battle		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7325 Beacon Hill Loop Apt 5		Amount 34.20	
City Orlando	State FL	Zip Code 32818-6426	Transaction ID : VN7CZA2V5Z2
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Catherine Battle		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 48 Good St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19119-2702	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SWK0
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Catherine Battle		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 48 Good St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19119-2702	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SXC7
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Catherine Battle		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 48 Good St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19119-2702	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SY55
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Catherine Battle		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 48 Good St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19119-2702	Transaction ID : VN7CZA2SYY2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		97855.02	

Full Name (Last, First, Middle Initial) of Payee Richard Beadling		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4225 1/2 Murray Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15217-2948	Transaction ID : VN7CZA2T4T4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Richard Beadling		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4225 1/2 Murray Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15217-2948	Transaction ID : VN7CZA2T5S6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Richard Beadling		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4225 1/2 Murray Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15217-2948	Transaction ID : VN7CZA2T6Q3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Richard Beadling		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4225 1/2 Murray Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15217-2948	Transaction ID : VN7CZA2T7M3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Zoe Beale		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5539 Baynton St # 5547		Amount 34.20	
City Philadelphia	State PA	Zip Code 19144-2208	Transaction ID : VN7CZA2SWR9
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Zoe Beale		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5539 Baynton St # 5547		Amount 34.20	
City Philadelphia	State PA	Zip Code 19144-2208	Transaction ID : VN7CZA2SXH7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Zoe Beale		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5539 Baynton St # 5547		Amount 34.20	
City Philadelphia	State PA	Zip Code 19144-2208	Transaction ID : VN7CZA2SYA4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		97855.02	

Full Name (Last, First, Middle Initial) of Payee Zoe Beale		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5539 Baynton St # 5547		Amount 34.20	
City Philadelphia	State PA	Zip Code 19144-2208	Transaction ID : VN7CZA2SZ32
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		97855.02	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Begin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12050 Lake Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1892	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SNM4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Michael Begin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12050 Lake Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1892	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SQ59
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Michael Begin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12050 Lake Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1892	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SRP6
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Begin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12050 Lake Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1892	Transaction ID : VN7CZA2ST71
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Austin Benjamin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1674 Monica St		Amount 34.20	
City Deltona	State FL	Zip Code 32725-3968	Transaction ID : VN7CZA2V5G4
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Austin Benjamin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1674 Monica St		Amount 34.20	
City Deltona	State FL	Zip Code 32725-3968	Transaction ID : VN7CZA2V6N6
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TX35
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TYS9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V0E8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V243
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Benton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5158 Columbo St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1035	Transaction ID : VN7CZA2T576
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Benton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5158 Columbo St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1035	Transaction ID : VN7CZA2T669
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Benton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5158 Columbo St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1035	Transaction ID : VN7CZA2T738
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Benton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5158 Columbo St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1035	Transaction ID : VN7CZA2T807
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Genesson Beraut		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 906 Fenmdell Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA2V4Y2
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Genesson Beraut		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 906 Fenmdell Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA2V634
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thomas Berrian		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6714 Christopher Park Ln		Amount 34.20	
City Canal Winchester	State OH	Zip Code 43110-8510	Transaction ID : VN7CZA2T9Y5
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thomas Berrian		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6714 Christopher Park Ln		Amount 34.20	
City Canal Winchester	State OH	Zip Code 43110-8510	Transaction ID : VN7CZA2TB37
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Berrian		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6714 Christopher Park Ln		Amount 34.20	
City Canal Winchester	State OH	Zip Code 43110-8510	Transaction ID : VN7CZA2TC70
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Berrian		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6714 Christopher Park Ln		Amount 34.20	
City Canal Winchester	State OH	Zip Code 43110-8510	Transaction ID : VN7CZA2TDB4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Regina Berry		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TXW2
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Regina Berry		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZH9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Regina Berry		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V176
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Regina Berry		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V2W2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Best Western Plus Edison Inn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1595 Mechanical Blvd		Amount 14.27	
City Garner	State NC	Zip Code 27529-2536	Transaction ID : VN7CZA2T1B9
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Best Western Plus Edison Inn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1595 Mechanical Blvd		Amount 14.27	
City Garner	State NC	Zip Code 27529-2536	Transaction ID : VN7CZA2T1C7
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Best Western Plus Edison Inn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1595 Mechanical Blvd		Amount 14.27	
City Garner	State NC	Zip Code 27529-2536	Transaction ID : VN7CZA2T1E2
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	42.81
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Best Western Plus Edison Inn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1595 Mechanical Blvd		Amount 14.27	
City Garner	State NC	Zip Code 27529-2536	Transaction ID : VN7CZA2T1F0
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Best Western Plus Edison Inn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1595 Mechanical Blvd		Amount 14.27	
City Garner	State NC	Zip Code 27529-2536	Transaction ID : VN7CZA2T1Q3
Purpose of Expenditure Lodging	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Best Western Plus Edison Inn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1595 Mechanical Blvd		Amount 14.27	
City Garner	State NC	Zip Code 27529-2536	Transaction ID : VN7CZA2T1R1
Purpose of Expenditure Lodging	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	42.81
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Best Western Plus Edison Inn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1595 Mechanical Blvd		Amount 14.27	
City Garner	State NC	Zip Code 27529-2536	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2T1T7
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Best Western Plus Edison Inn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1595 Mechanical Blvd		Amount 14.27	
City Garner	State NC	Zip Code 27529-2536	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2T1V5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Billy Lott		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1617 N Lorel Ave		Amount 17.46	
City Chicago	State IL	Zip Code 60639-4313	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SJS8
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought 32483.71		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	46.00
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Billy Lott		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1617 N Lorel Ave		Amount 17.46	
City Chicago	State IL	Zip Code 60639-4313	Transaction ID : VN7CZA2SK34
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Karen Bingaman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 486 Waggoner Rd		Amount 39.63	
City Reynoldsburg	State OH	Zip Code 43068-9707	Transaction ID : VN7CZA2TA76
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Karen Bingaman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 486 Waggoner Rd		Amount 39.63	
City Reynoldsburg	State OH	Zip Code 43068-9707	Transaction ID : VN7CZA2TBB1
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	96.72
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Karen Bingaman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 486 Waggoner Rd		Amount 39.63	
City Reynoldsburg	State OH	Zip Code 43068-9707	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Transaction ID : VN7CZA2TCF3

Full Name (Last, First, Middle Initial) of Payee Karen Bingaman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 486 Waggoner Rd		Amount 39.63	
City Reynoldsburg	State OH	Zip Code 43068-9707	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Transaction ID : VN7CZA2TDK7

Full Name (Last, First, Middle Initial) of Payee Remington Birinyi		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 9505 Murray Ridge Rd		Amount 34.20	
City Elyria	State OH	Zip Code 44035-6964	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2SND9

(a) SUBTOTAL of Itemized Independent Expenditures.....	113.46
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Remington Birinyi		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 9505 Murray Ridge Rd		Amount 34.20	
City Elyria	State OH	Zip Code 44035-6964	Transaction ID : VN7CZA2SPY4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Remington Birinyi		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 9505 Murray Ridge Rd		Amount 34.20	
City Elyria	State OH	Zip Code 44035-6964	Transaction ID : VN7CZA2SRF1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Remington Birinyi		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 9505 Murray Ridge Rd		Amount 34.20	
City Elyria	State OH	Zip Code 44035-6964	Transaction ID : VN7CZA2ST06
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jawneisha Bland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3399 E 65th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44127-1952	Transaction ID : VN7CZA2SP49
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jawneisha Bland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3399 E 65th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44127-1952	Transaction ID : VN7CZA2SQN6
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jawneisha Bland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3399 E 65th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44127-1952	Transaction ID : VN7CZA2SS61
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jawneisha Bland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3399 E 65th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44127-1952	Transaction ID : VN7CZA2STQ8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joshua Bland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1026 Jefferson Ave		Amount 34.20	
City Akron	State OH	Zip Code 44302-1046	Transaction ID : VN7CZA2SNY3
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joshua Bland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1026 Jefferson Ave		Amount 34.20	
City Akron	State OH	Zip Code 44302-1046	Transaction ID : VN7CZA2SQF8
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Joshua Bland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1026 Jefferson Ave		Amount 34.20	
City Akron	State OH	Zip Code 44302-1046	Transaction ID : VN7CZA2SS05
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joshua Bland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1026 Jefferson Ave		Amount 34.20	
City Akron	State OH	Zip Code 44302-1046	Transaction ID : VN7CZA2STH0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mary Bonner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3878 W 36th St Down		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-2716	Transaction ID : VN7CZA2SNB3
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Mary Bonner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3878 W 36th St Down		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-2716	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SPW8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Mary Bonner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3878 W 36th St Down		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-2716	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SRD5
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Mary Bonner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3878 W 36th St Down		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-2716	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SSY0
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2701 Chester Ave		Amount 10.87	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SV74	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2701 Chester Ave		Amount 3.65	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SV82	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2701 Chester Ave		Amount 5.21	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SV90	

(a) SUBTOTAL of Itemized Independent Expenditures.....	19.73
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2701 Chester Ave		Amount 10.87	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SVH3	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2701 Chester Ave		Amount 3.65	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SVJ1	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2701 Chester Ave		Amount 5.21	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SVK9	

(a) SUBTOTAL of Itemized Independent Expenditures.....	19.73
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2701 Chester Ave		Amount 10.87	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SVV2	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2701 Chester Ave		Amount 3.65	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SVW0	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2701 Chester Ave		Amount 5.21	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SVX8	

(a) SUBTOTAL of Itemized Independent Expenditures.....	19.73
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2701 Chester Ave		Amount 10.87	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SW51	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2701 Chester Ave		Amount 3.65	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SW69	

Full Name (Last, First, Middle Initial) of Payee BP Chester		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2701 Chester Ave		Amount 5.21	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SW77	

(a) SUBTOTAL of Itemized Independent Expenditures.....	19.73
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 22.80	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA2TFD4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 9506.60			

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 22.80	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA2TGB1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 9506.60			

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 22.80	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA2TK59
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 501553.03			

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 22.80	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA2TM36
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 4.17	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA2TS69
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 4.17	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA2TSS9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.14
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 4.17	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA2TVK6
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 4.17	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA2TW66
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Benjamin Britt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1424 Richmond Rd		Amount 34.20	
City Lyndhurst	State OH	Zip Code 44124-2460	Transaction ID : VN7CZA2SNZ1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	42.54
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Benjamin Britt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1424 Richmond Rd		Amount 34.20	
City Lyndhurst	State OH	Zip Code 44124-2460	Transaction ID : VN7CZA2SQG6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Benjamin Britt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1424 Richmond Rd		Amount 34.20	
City Lyndhurst	State OH	Zip Code 44124-2460	Transaction ID : VN7CZA2SS13
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Benjamin Britt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1424 Richmond Rd		Amount 34.20	
City Lyndhurst	State OH	Zip Code 44124-2460	Transaction ID : VN7CZA2STJ8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Dasent Brown		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1209 Majestic Palm Ct		Amount 34.20	
City Apopka	State FL	Zip Code 32712-2455	Transaction ID : VN7CZA2V5K8
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dasent Brown		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1209 Majestic Palm Ct		Amount 34.20	
City Apopka	State FL	Zip Code 32712-2455	Transaction ID : VN7CZA2V6R0
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V361
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	80.45
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V379
Purpose of Expenditure Rental Van	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V387
Purpose of Expenditure Rental Van	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V395
Purpose of Expenditure Rental Van	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	23.52
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 18.39	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V3A3
Purpose of Expenditure Rental Van	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 11.68	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V3B1
Purpose of Expenditure Rental Van	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 11.37	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V3C9
Purpose of Expenditure Rental Van	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.44
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V3D7
Purpose of Expenditure Rental Van	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 11.68	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V3E5
Purpose of Expenditure Rental Van	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V3J6
Purpose of Expenditure Rental Van	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.78
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V3K4
Purpose of Expenditure Rental Van	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V3M2
Purpose of Expenditure Rental Van	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V3N0
Purpose of Expenditure Rental Van	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	23.52
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 18.39	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald 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)	
		501553.03	

Transaction ID : VN7CZA2V3P8

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 11.68	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald 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)	
		501553.03	

Transaction ID : VN7CZA2V3Q6

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 11.37	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald 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)	
		501553.03	

Transaction ID : VN7CZA2V3R4

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.44
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V3S1
Purpose of Expenditure Rental Van	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 11.68	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V3T9
Purpose of Expenditure Rental Van	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V3Y1
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.78
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		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)	
		2016	
		357210.83	

Transaction ID : VN7CZA2V3Z9

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		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)	
		2016	
		357210.83	

Transaction ID : VN7CZA2V407

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		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)	
		2016	
		357210.83	

Transaction ID : VN7CZA2V415

(a) SUBTOTAL of Itemized Independent Expenditures.....	23.52
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 18.39	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V423
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 11.68	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V430
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 11.37	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V448
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.44
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V456
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 11.68	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V464
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V4A6
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.78
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V4B4
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V4C2
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V4D9
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	23.52
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 18.39	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V4E7
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 11.68	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V4F5
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 11.37	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V4G3
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.44
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V4H1
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		357210.83	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 212 W 4th St		Amount 11.68	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA2V4J9
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		357210.83	

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 11.77	
City Bala Cynwyd	State PA	Zip Code 19004-1617	Transaction ID : VN7CZA2SZC1
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.50
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 12.19	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SZD9

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 12.09	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SZE7

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 12.69	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SZF5

(a) SUBTOTAL of Itemized Independent Expenditures.....	36.97
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 11.77	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SZJ8

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 12.19	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SZK6

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 12.09	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SZM4

(a) SUBTOTAL of Itemized Independent Expenditures.....	36.05
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 12.69	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 11.77	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 12.19	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	36.65
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 12.09	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 12.69	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 11.77	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	36.55
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 12.19	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2SZZ1

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 12.09	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2T009

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1 Belmont Ave		Amount 12.69	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2T017

(a) SUBTOTAL of Itemized Independent Expenditures.....	36.97
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Chicago		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3721 N Broadway St		Amount 25.25	
City Chicago	State IL	Zip Code 60613-4104	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SKD3	

Full Name (Last, First, Middle Initial) of Payee Budget-Chicago		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3721 N Broadway St		Amount 25.25	
City Chicago	State IL	Zip Code 60613-4104	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SKE1	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.08	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SV09	

(a) SUBTOTAL of Itemized Independent Expenditures.....	62.58
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.65	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SV17
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 11.40	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SV25
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.16	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SV33
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.21
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.12	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SV41
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.59	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SV58
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.42	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SV66
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.13
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.08	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SVA8
Purpose of Expenditure Rental Van	Category/Type	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: Donald 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)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.65	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SVB6
Purpose of Expenditure Rental Van	Category/Type	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: Donald 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)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 11.40	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SVC4
Purpose of Expenditure Rental Van	Category/Type	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: Donald 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.....	36.13
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.16	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SVD2
Purpose of Expenditure Rental Van	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.12	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SVE0
Purpose of Expenditure Rental Van	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.59	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SVF7
Purpose of Expenditure Rental Van	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.87
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.42	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SVG5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.08	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SVM7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.65	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SVN5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.15
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 11.40	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SVP3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.16	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SVQ1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.12	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SVR9
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.68
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.59	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SVS6	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.42	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SVT4	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.08	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SVY6	

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.09
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.65	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SVZ4
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 11.40	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SW02
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.16	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SW10
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.21
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.12	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SW28
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.59	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SW35
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.42	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA2SW43
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.13
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Columbus		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1030 W 3rd Ave		Amount 12.57	
City Columbus	State OH	Zip Code 43212-3128	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2TDQ9

Full Name (Last, First, Middle Initial) of Payee Budget-Columbus		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1030 W 3rd Ave		Amount 12.57	
City Columbus	State OH	Zip Code 43212-3128	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2TDZ2

Full Name (Last, First, Middle Initial) of Payee Budget-Columbus		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1030 W 3rd Ave		Amount 12.57	
City Columbus	State OH	Zip Code 43212-3128	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2TE75

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.71
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Columbus		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1030 W 3rd Ave		Amount 12.57	
City Columbus	State OH	Zip Code 43212-3128	Transaction ID : VN7CZA2TEF9
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33RC5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33RD3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.13
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33RE1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33RF9
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33RK1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33RM9
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33RN6
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33RP4
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33S87
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33S94
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33SA2
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33SB0
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33SF2
Purpose of Expenditure Rental Van	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33SG0
Purpose of Expenditure Rental Van	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33SH8
Purpose of Expenditure Rental Van	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA33SJ6
Purpose of Expenditure Rental Van	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.77	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA2V711
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.33
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.13	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V729

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.77	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V737

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 8.08	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V745

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.98
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 8.08	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V753

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.77	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V7A2

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.13	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V7B0

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.98
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.77	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 8.08	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 8.08	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.93
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address Landside Terminal #4000		Amount 14.78	
City Pittsburgh	State PA	Zip Code 15231	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T815

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 11.50	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T823

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 11.70	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T831

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.98
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 11.50	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T849

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 11.70	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T857

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 12.43	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T865

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.63
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address Landside Terminal #4000		Amount 14.78	
City Pittsburgh	State PA	Zip Code 15231	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T8A6

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 11.50	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T8B4

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 11.70	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T8C2

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.98
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 11.50	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA2T8D0
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 11.70	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA2T8E8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 12.43	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA2T8F6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.63
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address Landside Terminal #4000		Amount 15.80	
City Pittsburgh	State PA	Zip Code 15231	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2T8K7	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 12.29	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2T8M5	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 12.51	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2T8N3	

(a) SUBTOTAL of Itemized Independent Expenditures.....	40.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 12.29	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2T8P1

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 12.51	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2T8Q9

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 13.29	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2T8R5

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.09
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address Landside Terminal #4000		Amount 15.80	
City Pittsburgh	State PA	Zip Code 15231	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2T8X4

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 12.29	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2T8Y2

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 12.51	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2T8Z0

(a) SUBTOTAL of Itemized Independent Expenditures.....	40.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 12.29	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2T908	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 12.51	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2T916	

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 625 Stanwix St		Amount 13.29	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2T924	

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.09
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA2T1A1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA2T1D4
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA2T1P6
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 50153.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.76
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald 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)	
		2016 501553.03	

Transaction ID : VN7CZA2T1S9

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.10	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		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)	
		2016 9506.60	

Transaction ID : VN7CZA2TMC7

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		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)	
		2016 9506.60	

Transaction ID : VN7CZA2TMD5

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.03
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Transaction ID : VN7CZA2TME3
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> Senate	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		9506.60	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Transaction ID : VN7CZA2TMF0
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> Senate	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		9506.60	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.10	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Transaction ID : VN7CZA2TN38
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		9506.60	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.94
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

Transaction ID : VN7CZA2TN46

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

Transaction ID : VN7CZA2TN54

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

Transaction ID : VN7CZA2TN62

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.85
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.10	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA2TQ82
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA2TQ99
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA2TQA7
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.03
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2TQB5	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.10	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2TQZ3	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2TR01	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.03
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA2TR19
Purpose of Expenditure Rental Van	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA2TR27
Purpose of Expenditure Rental Van	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 9.13	
City Upper Arlington	State OH	Zip Code 43212-1158	Transaction ID : VN7CZA2TDR7
Purpose of Expenditure Rental Van	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	22.97
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.47	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA2TDS5
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.43	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA2TDT3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.26	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA2TDV1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.16
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 9.13	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald 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)	
		501553.03	

Transaction ID : VN7CZA2TE00

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.47	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald 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)	
		501553.03	

Transaction ID : VN7CZA2TE18

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.43	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald 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)	
		501553.03	

Transaction ID : VN7CZA2TE26

(a) SUBTOTAL of Itemized Independent Expenditures.....	34.03
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.26	
City Upper Arlington	State OH	Zip Code 43212-1158	Transaction ID : VN7CZA2TE34
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 9.13	
City Upper Arlington	State OH	Zip Code 43212-1158	Transaction ID : VN7CZA2TE83
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.47	
City Upper Arlington	State OH	Zip Code 43212-1158	Transaction ID : VN7CZA2TE91
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.86
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.43	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.26	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 9.13	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.82
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.47	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Transaction ID : VN7CZA2TEJ2

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.43	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Transaction ID : VN7CZA2TEK0

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.26	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Transaction ID : VN7CZA2TEM8

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.16
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jatoya Burrage		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12205 Rexford Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2663	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SP72
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jatoya Burrage		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12205 Rexford Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2663	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SP98
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jatoya Burrage		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12205 Rexford Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2663	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SQR9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jatoya Burrage		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12205 Rexford Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2663	Transaction ID : VN7CZA2SQT5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jatoya Burrage		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12205 Rexford Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2663	Transaction ID : VN7CZA2SS94
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jatoya Burrage		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12205 Rexford Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2663	Transaction ID : VN7CZA2SSB0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jatoya Burrage		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12205 Rexford Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2663	Transaction ID : VN7CZA2STT2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jatoya Burrage		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12205 Rexford Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2663	Transaction ID : VN7CZA2STW7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jeffery Burton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1443 Matador Dr		Amount 47.06	
City Gotha	State FL	Zip Code 34734-4552	Transaction ID : VN7CZA2V4P1
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.46
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jeffery Burton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1443 Matador Dr		Amount 47.06	
City Gotha	State FL	Zip Code 34734-4552	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V5W9

Full Name (Last, First, Middle Initial) of Payee Samir Butt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 737 Melon Ter Apt B		Amount 34.20	
City Philadelphia	State PA	Zip Code 19123-3428	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SWH4

Full Name (Last, First, Middle Initial) of Payee Samir Butt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 737 Melon Ter Apt B		Amount 34.20	
City Philadelphia	State PA	Zip Code 19123-3428	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SXA2

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.46
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Samir Butt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 737 Melon Ter Apt B		Amount 34.20	
City Philadelphia	State PA	Zip Code 19123-3428	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		97855.02	

Transaction ID : VN7CZA2SY39

Full Name (Last, First, Middle Initial) of Payee Samir Butt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 737 Melon Ter Apt B		Amount 34.20	
City Philadelphia	State PA	Zip Code 19123-3428	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		97855.02	

Transaction ID : VN7CZA2SYW7

Full Name (Last, First, Middle Initial) of Payee Rashawn Byrd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2TXQ3

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Rashawn Byrd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA2TZC0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rashawn Byrd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA2V126
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rashawn Byrd		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA2V2Q3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Micah Callaway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TX69
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Micah Callaway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TYW3
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Micah Callaway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V0H2
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Micah Callaway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V276
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jasmine Campbell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TX92
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jasmine Campbell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TYZ7
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jasmine Campbell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jasmine Campbell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	78.11
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TMH6
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TMJ4
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TMK2
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.13
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TMM0
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TMN8
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TMP6
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.12
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Transaction ID : VN7CZA2TMQ4		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Purpose of Expenditure Lodging		Category/Type	
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Transaction ID : VN7CZA2TMR2		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Purpose of Expenditure Lodging		Category/Type	
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Transaction ID : VN7CZA2TMS9		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Purpose of Expenditure Lodging		Category/Type	
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.11
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TMT7
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TMV5
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TMW3
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.10
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TMX1
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TMY9
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TMZ7
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.11
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Transaction ID : VN7CZA2TN05			
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Transaction ID : VN7CZA2TN13			
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Transaction ID : VN7CZA2TN21			
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.10
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TN70
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TN86
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TN94
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.13
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNA2
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNB0
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNC8
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.13
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TND5
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNE3
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNF1
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.11
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNG9
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNH7
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNJ5
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.10
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNK3
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNN1
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNN9
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.10
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNP7
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNQ4
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNR2
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.11
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TNS0
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQC3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQD1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.12
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQE9
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQF7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQG5
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.13
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQH3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQJ1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQK8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.12
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQM6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQN4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQP2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.10
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQQ8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQR8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQS6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.10
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQT4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQV2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TQW0
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.11
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA2TQX7
Purpose of Expenditure Lodging	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA2TQY5
Purpose of Expenditure Lodging	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA2TR35
Purpose of Expenditure Lodging	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.11
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TR43
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TR51
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TR69
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.13
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TR76
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TR84
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TR92
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.12
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TRA0
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TRB8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TRC4
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.11
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TRD2
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TRE0
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TRF8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.10
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TRG6

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TRH3

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.71	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TRJ1

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.11
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TRK9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TRM7
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA2TRN5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.10
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TXN7
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZA4
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V100
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V2N7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Carlino		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3729 E 53rd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-1118	Transaction ID : VN7CZA2SN89
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Carlino		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3729 E 53rd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-1118	Transaction ID : VN7CZA2SPS4
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee John Carlino		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3729 E 53rd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-1118	Transaction ID : VN7CZA2SRA2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Carlino		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3729 E 53rd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-1118	Transaction ID : VN7CZA2SSV7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kelly Casey		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 701 Arlington St		Amount 47.06	
City Orlando	State FL	Zip Code 32805-1413	Transaction ID : VN7CZA2V5E8
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.46
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kelly Casey		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 701 Arlington St		Amount 47.06	
City Orlando	State FL	Zip Code 32805-1413	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2V6K0

Full Name (Last, First, Middle Initial) of Payee Nolan Champer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 66 E Maynard Ave		Amount 36.48	
City Columbus	State OH	Zip Code 43202-2941	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2TA68

Full Name (Last, First, Middle Initial) of Payee Nolan Champer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 66 E Maynard Ave		Amount 36.48	
City Columbus	State OH	Zip Code 43202-2941	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2TBA3

(a) SUBTOTAL of Itemized Independent Expenditures.....	120.02
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Nolan Champer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 66 E Maynard Ave		Amount 36.48	
City Columbus	State OH	Zip Code 43202-2941	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2TCE5	

Full Name (Last, First, Middle Initial) of Payee Nolan Champer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 66 E Maynard Ave		Amount 36.48	
City Columbus	State OH	Zip Code 43202-2941	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2TDJ0	

Full Name (Last, First, Middle Initial) of Payee Charity Gladney		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5108 W 21st St Apt 3		Amount 59.35	
City Cicero	State IL	Zip Code 60804-2386	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SK01	

(a) SUBTOTAL of Itemized Independent Expenditures.....	132.31
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Charity Gladney		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5108 W 21st St Apt 3		Amount 59.35	
City Cicero	State IL	Zip Code 60804-2386	Transaction ID : VN7CZA2SKA0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		32483.71	

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 44.61	
City Seattle	State WA	Zip Code 98109	Transaction ID : VN7CZA2SWD2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 44.61	
City Seattle	State WA	Zip Code 98109	Transaction ID : VN7CZA2SX60
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	148.57
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 44.61	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SXZ7
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 44.61	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SYR5
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 6.25	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2T058
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	95.47
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 6.25	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2T074
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 6.25	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2T090
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 6.25	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2T0B6
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	18.75
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Charles Childers		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 54 N Ogden Ave		Amount 39.63	
City Columbus	State OH	Zip Code 43204-3310	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TA84
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Charles Childers		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 54 N Ogden Ave		Amount 39.63	
City Columbus	State OH	Zip Code 43204-3310	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TBC9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Charles Childers		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 54 N Ogden Ave		Amount 39.63	
City Columbus	State OH	Zip Code 43204-3310	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TCG1
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		357210.83	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	118.89
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Charles Childers		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 54 N Ogden Ave		Amount 39.63	
City Columbus	State OH	Zip Code 43204-3310	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2TDM5	

Full Name (Last, First, Middle Initial) of Payee Leron Clardy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2TWT4	

Full Name (Last, First, Middle Initial) of Payee Leron Clardy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2TYH8	

(a) SUBTOTAL of Itemized Independent Expenditures.....	108.03
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Leron Clardy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2V065	

Full Name (Last, First, Middle Initial) of Payee Leron Clardy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2V1W0	

Full Name (Last, First, Middle Initial) of Payee Deborah Clark		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5410 Vista View Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27612-8710	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2T0C4	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Deborah Clark		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5410 Vista View Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27612-8710	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

Transaction ID : VN7CZA2T0H3

Full Name (Last, First, Middle Initial) of Payee Deborah Clark		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5410 Vista View Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27612-8710	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2T102

Full Name (Last, First, Middle Initial) of Payee Deborah Clark		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5410 Vista View Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27612-8710	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2T151

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Marion Clarke		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6830 Grace Ave		Amount 44.46	
City North College Hill	State OH	Zip Code 45239-4831	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TWK8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Marion Clarke		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6830 Grace Ave		Amount 44.46	
City North College Hill	State OH	Zip Code 45239-4831	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TYA3
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Marion Clarke		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6830 Grace Ave		Amount 44.46	
City North College Hill	State OH	Zip Code 45239-4831	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TZZ0
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	133.38
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Marion Clarke		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6830 Grace Ave		Amount 44.46	
City North College Hill	State OH	Zip Code 45239-4831	Transaction ID : VN7CZA2V1N6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Corneilius Coachman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2120 Stryker St		Amount 34.20	
City Orlando	State FL	Zip Code 32805-1215	Transaction ID : VN7CZA2V4Z0
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Corneilius Coachman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2120 Stryker St		Amount 34.20	
City Orlando	State FL	Zip Code 32805-1215	Transaction ID : VN7CZA2V642
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	112.86
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Portia Cochrum		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TXB8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Portia Cochrum		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TZ13
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Portia Cochrum		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2V0Q9
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Portia Cochrum		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2V2C6

Full Name (Last, First, Middle Initial) of Payee Malcolm Collins		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 336 Eddy Rd Apt 12		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-1638	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2SP07

Full Name (Last, First, Middle Initial) of Payee Malcolm Collins		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 336 Eddy Rd Apt 12		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-1638	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2SQH4

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Malcolm Collins		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 336 Eddy Rd Apt 12		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-1638	Transaction ID : VN7CZA2SS21
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		357210.83	

Full Name (Last, First, Middle Initial) of Payee Malcolm Collins		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 336 Eddy Rd Apt 12		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-1638	Transaction ID : VN7CZA2STK6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		357210.83	

Full Name (Last, First, Middle Initial) of Payee Isaac Cowan-Page		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2130 Vantine St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-1138	Transaction ID : VN7CZA2T4N4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Isaac Cowan-Page		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2130 Vantine St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-1138	Transaction ID : VN7CZA2T5M7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Isaac Cowan-Page		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2130 Vantine St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-1138	Transaction ID : VN7CZA2T6J4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Isaac Cowan-Page		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2130 Vantine St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-1138	Transaction ID : VN7CZA2T7F3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Vivian Crawford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TX51
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Vivian Crawford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TYV5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Vivian Crawford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V0G4
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Vivian Crawford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V269
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mable Crawford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 24 Spencer Valley Dr		Amount 26.60	
City Saint Peters	State MO	Zip Code 63376-2557	Transaction ID : VN7CZA2TEW1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mable Crawford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 24 Spencer Valley Dr		Amount 26.60	
City Saint Peters	State MO	Zip Code 63376-2557	Transaction ID : VN7CZA2TFT6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	87.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Mable Crawford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 24 Spencer Valley Dr		Amount 26.60	
City Saint Peters	State MO	Zip Code 63376-2557	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TJM4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Mable Crawford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 24 Spencer Valley Dr		Amount 26.60	
City Saint Peters	State MO	Zip Code 63376-2557	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TKJ1
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Mable Crawford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 24 Spencer Valley Dr		Amount 4.17	
City Saint Peters	State MO	Zip Code 63376-2557	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TRQ1
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	57.37
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Mable Crawford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 24 Spencer Valley Dr		Amount 4.17	
City Saint Peters	State MO	Zip Code 63376-2557	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TSA1
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input 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)	

Full Name (Last, First, Middle Initial) of Payee Mable Crawford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 24 Spencer Valley Dr		Amount 4.17	
City Saint Peters	State MO	Zip Code 63376-2557	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TV49
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input 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)	

Full Name (Last, First, Middle Initial) of Payee Mable Crawford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 24 Spencer Valley Dr		Amount 4.17	
City Saint Peters	State MO	Zip Code 63376-2557	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TVQ7
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	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.....	12.51
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jude Daceus		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2562 Cinderlane Parkway		Amount 10.69	
City Orlando	State FL	Zip Code 32808	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V5V1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jude Daceus		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2562 Cinderlane Parkway		Amount 10.69	
City Orlando	State FL	Zip Code 32808	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V703
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Laurel Davis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TXA0
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	55.58
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Laurel Davis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZ05
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Laurel Davis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V0P1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Laurel Davis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V2B8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee George Davis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 218 Hickory Glen Ln		Amount 22.80	
City Durham	State NC	Zip Code 27703-3368	Transaction ID : VN7CZA2TFF9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee George Davis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 218 Hickory Glen Ln		Amount 22.80	
City Durham	State NC	Zip Code 27703-3368	Transaction ID : VN7CZA2TGD6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee George Davis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 218 Hickory Glen Ln		Amount 22.80	
City Durham	State NC	Zip Code 27703-3368	Transaction ID : VN7CZA2TK74
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee George Davis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 218 Hickory Glen Ln		Amount 22.80	
City Durham	State NC	Zip Code 27703-3368	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TM51

Full Name (Last, First, Middle Initial) of Payee Cory Dawson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3878 W 36th St Down		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-2716	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SN56

Full Name (Last, First, Middle Initial) of Payee Cory Dawson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3878 W 36th St Down		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-2716	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SPP1

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Cory Dawson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3878 W 36th St Down		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-2716	Transaction ID : VN7CZA2SR78
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cory Dawson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3878 W 36th St Down		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-2716	Transaction ID : VN7CZA2SSR3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Miranda Dean		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 40 Rowland Ave		Amount 39.63	
City Delaware	State OH	Zip Code 43015-2313	Transaction ID : VN7CZA2T999
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	108.03
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Miranda Dean		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 40 Rowland Ave		Amount 39.63	
City Delaware	State OH	Zip Code 43015-2313	Transaction ID : VN7CZA2TAE2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Miranda Dean		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 40 Rowland Ave		Amount 39.63	
City Delaware	State OH	Zip Code 43015-2313	Transaction ID : VN7CZA2TBJ6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Miranda Dean		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 40 Rowland Ave		Amount 39.63	
City Delaware	State OH	Zip Code 43015-2313	Transaction ID : VN7CZA2TCP8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	118.89
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Joseph Debow		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 471 Clearview Dr Apt 6		Amount 34.20	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA2SNV9
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joseph Debow		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 471 Clearview Dr Apt 6		Amount 34.20	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA2SQC5
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joseph Debow		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 471 Clearview Dr Apt 6		Amount 34.20	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA2SRX2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Joseph Debow		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 471 Clearview Dr Apt 6		Amount 34.20	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA2STE7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Evelyn Deloach		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TXE8
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Evelyn Deloach		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZK5
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Evelyn Deloach		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Evelyn Deloach		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Devon Countee		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1263 W Pratt Blvd Apt 506		Amount 149.63	
City Chicago	State IL	Zip Code 60626-4469	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 32483.71		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	218.03
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Devon Countee		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1263 W Pratt Blvd Apt 506		Amount 149.63	
City Chicago	State IL	Zip Code 60626-4469	Transaction ID : VN7CZA2SK76
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 32483.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 48.32	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TWP2
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 48.32	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TYD7
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	246.27
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 48.32	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2V023	

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 48.32	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2V1R8	

Full Name (Last, First, Middle Initial) of Payee Madison Dines		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 22.80	
City Milwaukie	State OR	Zip Code 97222-6184	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2TES8	

(a) SUBTOTAL of Itemized Independent Expenditures.....	119.44
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Madison Dines		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 22.80	
City Milwaukie	State OR	Zip Code 97222-6184	Transaction ID : VN7CZA2TFQ3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Madison Dines		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 22.80	
City Milwaukie	State OR	Zip Code 97222-6184	Transaction ID : VN7CZA2TJH1
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Madison Dines		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 22.80	
City Milwaukie	State OR	Zip Code 97222-6184	Transaction ID : VN7CZA2TKF8
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Madison Dines		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 4.17	
City Milwaukie	State OR	Zip Code 97222-6184	Transaction ID : VN7CZA2TRX8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Madison Dines		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 4.17	
City Milwaukie	State OR	Zip Code 97222-6184	Transaction ID : VN7CZA2TSG8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Madison Dines		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 4.17	
City Milwaukie	State OR	Zip Code 97222-6184	Transaction ID : VN7CZA2TVA7
Purpose of Expenditure Per Diem	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 50153.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Madison Dines		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 4.17	
City Milwaukie	State OR	Zip Code 97222-6184	Transaction ID : VN7CZA2TVX5
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee William Doby		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6945 SW Scholls Ferry Rd		Amount 22.80	
City Beaverton	State OR	Zip Code 97008-5435	Transaction ID : VN7CZA2TFN7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee William Doby		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6945 SW Scholls Ferry Rd		Amount 22.80	
City Beaverton	State OR	Zip Code 97008-5435	Transaction ID : VN7CZA2TGK4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.77
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee William Doby		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6945 SW Scholls Ferry Rd		Amount 22.80	
City Beaverton	State OR	Zip Code 97008-5435	Transaction ID : VN7CZA2TKD2
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee William Doby		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6945 SW Scholls Ferry Rd		Amount 22.80	
City Beaverton	State OR	Zip Code 97008-5435	Transaction ID : VN7CZA2TMB9
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee William Doby		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6945 SW Scholls Ferry Rd		Amount 4.17	
City Beaverton	State OR	Zip Code 97008-5435	Transaction ID : VN7CZA2TS85
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.77
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee William Doby		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6945 SW Scholls Ferry Rd		Amount 4.17	
City Beaverton	State OR	Zip Code 97008-5435	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TSV5
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Doby		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6945 SW Scholls Ferry Rd		Amount 4.17	
City Beaverton	State OR	Zip Code 97008-5435	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TVN1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Doby		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6945 SW Scholls Ferry Rd		Amount 4.17	
City Beaverton	State OR	Zip Code 97008-5435	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TW82
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Anthony Dotson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TXG8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Anthony Dotson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TZ62
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Anthony Dotson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2V0W9
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input checked="" type="checkbox"/> Senate	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Anthony Dotson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V2H5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Duncan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 105 S Watt St		Amount 34.20	
City Chillicothe	State OH	Zip Code 45601-3570	Transaction ID : VN7CZA2T9C3
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Duncan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 105 S Watt St		Amount 34.20	
City Chillicothe	State OH	Zip Code 45601-3570	Transaction ID : VN7CZA2TAH5
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kevin Duncan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 105 S Watt St		Amount 34.20	
City Chillicothe	State OH	Zip Code 45601-3570	Transaction ID : VN7CZA2TBN0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Duncan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 105 S Watt St		Amount 34.20	
City Chillicothe	State OH	Zip Code 45601-3570	Transaction ID : VN7CZA2TCS2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Theresa Dunn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1377 Genessee Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43211-1434	Transaction ID : VN7CZA2TA27
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Theresa Dunn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1377 Genessee Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43211-1434	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Theresa Dunn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1377 Genessee Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43211-1434	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Theresa Dunn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1377 Genessee Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43211-1434	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA2TF84
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA2TG61
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA2TK09
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 50153.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA2TKY6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Danielle Earl		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2006 E Main St		Amount 22.80	
City Durham	State NC	Zip Code 27703-3220	Transaction ID : VN7CZA2TFJ3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Danielle Earl		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2006 E Main St		Amount 22.80	
City Durham	State NC	Zip Code 27703-3220	Transaction ID : VN7CZA2TGG0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Danielle Earl		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2006 E Main St		Amount 22.80	
City Durham	State NC	Zip Code 27703-3220	Transaction ID : VN7CZA2TKA8
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Danielle Earl		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2006 E Main St		Amount 22.80	
City Durham	State NC	Zip Code 27703-3220	Transaction ID : VN7CZA2TM85
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kimberly Early		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 41.68	
City Cincinnati	State OH	Zip Code 45219-1968	Transaction ID : VN7CZA2TWQ0
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	87.28
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kimberly Early		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 41.68	
City Cincinnati	State OH	Zip Code 45219-1968	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2TYE5

Full Name (Last, First, Middle Initial) of Payee Kimberly Early		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 41.68	
City Cincinnati	State OH	Zip Code 45219-1968	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Transaction ID : VN7CZA2V031

Full Name (Last, First, Middle Initial) of Payee Kimberly Early		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 41.68	
City Cincinnati	State OH	Zip Code 45219-1968	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Transaction ID : VN7CZA2V1S6

(a) SUBTOTAL of Itemized Independent Expenditures.....	125.04
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jeriamiyah Edwards		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 10 Curtin Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15210-1302	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T4Z3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jeriamiyah Edwards		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 10 Curtin Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15210-1302	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T5Y6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jeriamiyah Edwards		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 10 Curtin Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15210-1302	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T6W3
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jeriamiyah Edwards		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 10 Curtin Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15210-1302	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4714 Lee Ave		Amount 22.80	
City Saint Louis	State MO	Zip Code 63115-2108	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4714 Lee Ave		Amount 22.80	
City Saint Louis	State MO	Zip Code 63115-2108	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4714 Lee Ave		Amount 22.80	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA2TJK6
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4714 Lee Ave		Amount 22.80	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA2TKH3
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA2TRR9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.77
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA2TSB9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA2TV57
Purpose of Expenditure Per Diem	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA2TVR5
Purpose of Expenditure Per Diem	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Ruari Egan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 216 S Saint Clair St Apt 1		Amount 52.01	
City Pittsburgh	State PA	Zip Code 15206-3655	Transaction ID : VN7CZA2T4B5
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ruari Egan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 216 S Saint Clair St Apt 1		Amount 52.01	
City Pittsburgh	State PA	Zip Code 15206-3655	Transaction ID : VN7CZA2T5A0
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ruari Egan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 216 S Saint Clair St Apt 1		Amount 52.01	
City Pittsburgh	State PA	Zip Code 15206-3655	Transaction ID : VN7CZA2T685
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	156.03
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Ruari Egan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 216 S Saint Clair St Apt 1		Amount 52.01	
City Pittsburgh	State PA	Zip Code 15206-3655	Transaction ID : VN7CZA2T754
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jacob Ehrlich		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 406 Kent Dr		Amount 22.80	
City Cary	State NC	Zip Code 27511-3105	Transaction ID : VN7CZA2TF92
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jacob Ehrlich		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 406 Kent Dr		Amount 22.80	
City Cary	State NC	Zip Code 27511-3105	Transaction ID : VN7CZA2TG79
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	97.61
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jacob Ehrlich		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 406 Kent Dr		Amount 22.80	
City Cary	State NC	Zip Code 27511-3105	Transaction ID : VN7CZA2TK17
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jacob Ehrlich		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 406 Kent Dr		Amount 22.80	
City Cary	State NC	Zip Code 27511-3105	Transaction ID : VN7CZA2TKZ4
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Abdallah El Hamawi		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 34.20	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA2V523
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Abdallah El Hamawi		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 34.20	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA2V676
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Youssef El Hamawi		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 34.20	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA2V557
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Youssef El Hamawi		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 34.20	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA2V6A9
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jared Elick		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1442 Bayshore Dr Apt 1D		Amount 34.20	
City Columbus	State OH	Zip Code 43204-3840	Transaction ID : VN7CZA2T9B5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Jared Elick		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1442 Bayshore Dr Apt 1D		Amount 34.20	
City Columbus	State OH	Zip Code 43204-3840	Transaction ID : VN7CZA2TAG7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Jared Elick		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1442 Bayshore Dr Apt 1D		Amount 34.20	
City Columbus	State OH	Zip Code 43204-3840	Transaction ID : VN7CZA2TBM2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		357210.83	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jared Elick		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1442 Bayshore Dr Apt 1D		Amount 34.20	
City Columbus	State OH	Zip Code 43204-3840	Transaction ID : VN7CZA2TCR4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		357210.83	

Full Name (Last, First, Middle Initial) of Payee Kyle Euype		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1222 W Clifton Blvd		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1053	Transaction ID : VN7CZA2SP56
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Kyle Euype		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1222 W Clifton Blvd		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1053	Transaction ID : VN7CZA2SQP4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kyle Euype		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1222 W Clifton Blvd		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1053	Transaction ID : VN7CZA2SS79
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kyle Euype		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1222 W Clifton Blvd		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1053	Transaction ID : VN7CZA2STR6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jashala Evans		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA2TFG7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jashala Evans		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA2TGE4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jashala Evans		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA2TK82
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jashala Evans		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA2TM69
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Eleanora Everette		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3508 Hastings Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28311-7625	Transaction ID : VN7CZA2TFE2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eleanora Everette		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3508 Hastings Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28311-7625	Transaction ID : VN7CZA2TGC9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eleanora Everette		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3508 Hastings Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28311-7625	Transaction ID : VN7CZA2TK67
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 50153.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Eleanora Everette		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3508 Hastings Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28311-7625	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TM44

Full Name (Last, First, Middle Initial) of Payee Kollin Faessler		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5926 Mausser Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-2922	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V5J0

Full Name (Last, First, Middle Initial) of Payee Kollin Faessler		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5926 Mausser Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-2922	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V6Q2

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Bridget Fawcett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5038 Gilbert Rd		Amount 38.19	
City Centerburg	State OH	Zip Code 43011-9495	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T966

Full Name (Last, First, Middle Initial) of Payee Bridget Fawcett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5038 Gilbert Rd		Amount 38.19	
City Centerburg	State OH	Zip Code 43011-9495	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TAB8

Full Name (Last, First, Middle Initial) of Payee Bridget Fawcett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5038 Gilbert Rd		Amount 38.19	
City Centerburg	State OH	Zip Code 43011-9495	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TBF2

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.57
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Bridget Fawcett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5038 Gilbert Rd		Amount 38.19	
City Centerburg	State OH	Zip Code 43011-9495	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ashley Feist		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2203 Sauer Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1436	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ashley Feist		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2203 Sauer Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1436	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	132.35
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Ashley Feist		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2203 Sauer Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1436	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ashley Feist		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2203 Sauer Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45219-1436	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Fonadren Oliver		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2014 S Racine Ave		Amount 72.67	
City Chicago	State IL	Zip Code 60608-5346	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 32483.71		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	166.83
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Fonadren Oliver		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2014 S Racine Ave		Amount 72.67	
City Chicago	State IL	Zip Code 60608-5346	Transaction ID : VN7CZA2SK42
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 32483.71		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Todd Foose		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3001 Marshall Rd Apt 515		Amount 7.50	
City Pittsburgh	State PA	Zip Code 15214-2649	Transaction ID : VN7CZA2T1W3
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Todd Foose		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3001 Marshall Rd Apt 515		Amount 7.50	
City Pittsburgh	State PA	Zip Code 15214-2649	Transaction ID : VN7CZA2T1Y9
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	87.67
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Todd Foose		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3001 Marshall Rd Apt 515		Amount 7.50	
City Pittsburgh	State PA	Zip Code 15214-2649	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2T246
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Todd Foose		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3001 Marshall Rd Apt 515		Amount 7.50	
City Pittsburgh	State PA	Zip Code 15214-2649	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2T262
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lloyd Franklin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7917 Lake Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-1932	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SNN2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Lloyd Franklin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7917 Lake Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-1932	Transaction ID : VN7CZA2SQ67
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Lloyd Franklin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7917 Lake Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-1932	Transaction ID : VN7CZA2SRQ4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Lloyd Franklin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7917 Lake Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-1932	Transaction ID : VN7CZA2ST89
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 28.89	
City Seattle	State WA	Zip Code 98105-1745	Transaction ID : VN7CZA33NV7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 9506.60			

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 28.89	
City Seattle	State WA	Zip Code 98105-1745	Transaction ID : VN7CZA33P80
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 9506.60			

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 28.89	
City Seattle	State WA	Zip Code 98105-1745	Transaction ID : VN7CZA33QF8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 50153.03			

(a) SUBTOTAL of Itemized Independent Expenditures.....	86.67
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 28.89	
City Seattle	State WA	Zip Code 98105-1745	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33QW9

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.17	
City Seattle	State WA	Zip Code 98105-1745	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33SM1

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.17	
City Seattle	State WA	Zip Code 98105-1745	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33SQ5

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.23
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.17	
City Seattle	State WA	Zip Code 98105-1745	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33T06

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.17	
City Seattle	State WA	Zip Code 98105-1745	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33T30

Full Name (Last, First, Middle Initial) of Payee Tahira Fuentes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3937 Hahns Ln		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4782	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33NX3

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.14
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tahira Fuentes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3937 Hahns Ln		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4782	Transaction ID : VN7CZA33PA6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		9506.60	

Full Name (Last, First, Middle Initial) of Payee Tahira Fuentes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3937 Hahns Ln		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4782	Transaction ID : VN7CZA33QH4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Tahira Fuentes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3937 Hahns Ln		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4782	Transaction ID : VN7CZA33QY5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Deanna Garrett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 48.32	
City Fort Thomas	State KY	Zip Code 41075-2520	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TWM6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Deanna Garrett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 48.32	
City Fort Thomas	State KY	Zip Code 41075-2520	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TYB1
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Deanna Garrett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 48.32	
City Fort Thomas	State KY	Zip Code 41075-2520	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V008
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	144.96
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Deanna Garrett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 48.32	
City Fort Thomas	State KY	Zip Code 41075-2520	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V1P4
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TWS6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TYG0
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	116.72
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA2V057
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA2V1V2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee GetGo #3109 East McKeesport		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 436 Lincoln Hwy		Amount 10.37	
City East Mc Keesport	State PA	Zip Code 15035-1426	Transaction ID : VN7CZA2T873
Purpose of Expenditure Gas	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	78.77
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee GetGo #3109 East McKeesport		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 436 Lincoln Hwy		Amount 10.37	
City	State	Zip Code	Transaction ID : VN7CZA2T8G4
East Mc Keesport	PA	15035-1426	
Purpose of Expenditure Gas	Category/ Type	Office Sought:	<input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One:	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016	
501553.03		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee GetGo #3109 East McKeesport		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 436 Lincoln Hwy		Amount 11.09	
City	State	Zip Code	Transaction ID : VN7CZA2T8T1
East Mc Keesport	PA	15035-1426	
Purpose of Expenditure Gas	Category/ Type	Office Sought:	<input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One:	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016	
97855.02		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee GetGo #3109 East McKeesport		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 436 Lincoln Hwy		Amount 11.09	
City	State	Zip Code	Transaction ID : VN7CZA2T932
East Mc Keesport	PA	15035-1426	
Purpose of Expenditure Gas	Category/ Type	Office Sought:	<input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016	
97855.02		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.55
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	32.55

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Temeisha Gibson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2202 Jones Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4920	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA33P49
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		9506.60	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Temeisha Gibson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2202 Jones Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4920	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA33PH1
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		9506.60	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Temeisha Gibson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2202 Jones Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4920	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA33QR9
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		50153.03	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Temeisha Gibson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2202 Jones Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4920	Transaction ID : VN7CZA33R50
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 134 W 107th St		Amount 4.17	
City Chicago	State IL	Zip Code 60628-3437	Transaction ID : VN7CZA2TRW0
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 134 W 107th St		Amount 4.17	
City Chicago	State IL	Zip Code 60628-3437	Transaction ID : VN7CZA2TSF0
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.14
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 134 W 107th St		Amount 4.17	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA2TV99
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 134 W 107th St		Amount 4.17	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA2VW7
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Aqueelah Goins		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1647 Elsinore Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44112-3815	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SNJ8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	42.54
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Aqueelah Goins		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1647 Elsinore Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44112-3815	Transaction ID : VN7CZA2SQ33
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Aqueelah Goins		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1647 Elsinore Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44112-3815	Transaction ID : VN7CZA2SRM1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Aqueelah Goins		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1647 Elsinore Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44112-3815	Transaction ID : VN7CZA2ST56
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee James Gouine		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3242 Tumwater Valley Dr		Amount 34.20	
City Pickerington	State OH	Zip Code 43147-9831	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T9D1

Full Name (Last, First, Middle Initial) of Payee James Gouine		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3242 Tumwater Valley Dr		Amount 34.20	
City Pickerington	State OH	Zip Code 43147-9831	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TAJ3

Full Name (Last, First, Middle Initial) of Payee James Gouine		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3242 Tumwater Valley Dr		Amount 34.20	
City Pickerington	State OH	Zip Code 43147-9831	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TBP8

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee James Gouine		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3242 Tumwater Valley Dr		Amount 34.20	
City Pickerington	State OH	Zip Code 43147-9831	Transaction ID : VN7CZA2TCT0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Racheal Green		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 527 N Negley Ave Apt 3		Amount 52.01	
City Pittsburgh	State PA	Zip Code 15206-2445	Transaction ID : VN7CZA2T4E9
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Racheal Green		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 527 N Negley Ave Apt 3		Amount 52.01	
City Pittsburgh	State PA	Zip Code 15206-2445	Transaction ID : VN7CZA2T5D4
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	138.22
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Racheal Green		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 527 N Negley Ave Apt 3		Amount 52.01	
City Pittsburgh	State PA	Zip Code 15206-2445	Transaction ID : VN7CZA2T6B9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		97855.02	

Full Name (Last, First, Middle Initial) of Payee Racheal Green		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 527 N Negley Ave Apt 3		Amount 52.01	
City Pittsburgh	State PA	Zip Code 15206-2445	Transaction ID : VN7CZA2T788
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		97855.02	

Full Name (Last, First, Middle Initial) of Payee Rose Greene		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 417 Moline St		Amount 22.80	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA2TF01
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		9506.60	

(a) SUBTOTAL of Itemized Independent Expenditures.....	126.82
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Rose Greene		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 417 Moline St		Amount 22.80	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA2TFY8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rose Greene		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 417 Moline St		Amount 22.80	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA2TJR6
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rose Greene		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 417 Moline St		Amount 22.80	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA2TKP3
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee William Greene		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 36 E Montana St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19119-2210	Transaction ID : VN7CZA2SWC5
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Greene		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 36 E Montana St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19119-2210	Transaction ID : VN7CZA2SX52
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Greene		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 36 E Montana St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19119-2210	Transaction ID : VN7CZA2SXY0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee William Greene		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 36 E Montana St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19119-2210	Transaction ID : VN7CZA2SYQ7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		97855.02	

Full Name (Last, First, Middle Initial) of Payee John Griffith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5389 Shannon Ln		Amount 34.20	
City Columbus	State OH	Zip Code 43235-7294	Transaction ID : VN7CZA2T9T4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee John Griffith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5389 Shannon Ln		Amount 34.20	
City Columbus	State OH	Zip Code 43235-7294	Transaction ID : VN7CZA2TAZ6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee John Griffith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5389 Shannon Ln		Amount 34.20	
City Columbus	State OH	Zip Code 43235-7294	Transaction ID : VN7CZA2TC38
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Griffith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5389 Shannon Ln		Amount 34.20	
City Columbus	State OH	Zip Code 43235-7294	Transaction ID : VN7CZA2TD73
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA2TFB8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA2TG95
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA2TK33
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA2TM10
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Nicholas Grubbs		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TWV2

Full Name (Last, First, Middle Initial) of Payee Nicholas Grubbs		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TYJ6

Full Name (Last, First, Middle Initial) of Payee Nicholas Grubbs		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V073

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Nicholas Grubbs		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V1X7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Robert Gruss		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1534 Belle Ave		Amount 45.44	
City Lakewood	State OH	Zip Code 44107-4330	Transaction ID : VN7CZA2SMZ8
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Robert Gruss		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1534 Belle Ave		Amount 45.44	
City Lakewood	State OH	Zip Code 44107-4330	Transaction ID : VN7CZA2SPG3
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	125.08
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Robert Gruss		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1534 Belle Ave		Amount 45.44	
City Lakewood	State OH	Zip Code 44107-4330	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2SR10

Full Name (Last, First, Middle Initial) of Payee Robert Gruss		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1534 Belle Ave		Amount 45.44	
City Lakewood	State OH	Zip Code 44107-4330	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2SSJ6

Full Name (Last, First, Middle Initial) of Payee Michael Gutensohn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1505 S High St Apt A		Amount 34.20	
City Columbus	State OH	Zip Code 43207-1847	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2T9Z3

(a) SUBTOTAL of Itemized Independent Expenditures.....	125.08
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Gutensohn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1505 S High St Apt A		Amount 34.20	
City Columbus	State OH	Zip Code 43207-1847	Transaction ID : VN7CZA2TB45
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		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 Gutensohn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1505 S High St Apt A		Amount 34.20	
City Columbus	State OH	Zip Code 43207-1847	Transaction ID : VN7CZA2TC88
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		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 Gutensohn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1505 S High St Apt A		Amount 34.20	
City Columbus	State OH	Zip Code 43207-1847	Transaction ID : VN7CZA2TDC2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Ian Haffling		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 917 McCandless Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15201-2451	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T527
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ian Haffling		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 917 McCandless Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15201-2451	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T610
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ian Haffling		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 917 McCandless Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15201-2451	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T6Z7
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Ian Haffling		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 917 McCandless Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15201-2451	Transaction ID : VN7CZA2T7W6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		97855.02	

Full Name (Last, First, Middle Initial) of Payee Allen Hafford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TX19
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Allen Hafford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TYQ4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Allen Hafford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2V0C2
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		357210.83	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Allen Hafford		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2V227
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		357210.83	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Conrad Hampton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3461 Shadeland Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15212-2253	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2T4J0
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Conrad Hampton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3461 Shadeland Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15212-2253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T5H5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

Full Name (Last, First, Middle Initial) of Payee Conrad Hampton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3461 Shadeland Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15212-2253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T6F0
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

Full Name (Last, First, Middle Initial) of Payee Conrad Hampton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3461 Shadeland Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15212-2253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T7C9
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Margaret Hane		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1953	Transaction ID : VN7CZA2T4R8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Margaret Hane		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1953	Transaction ID : VN7CZA2T5Q1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Margaret Hane		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1953	Transaction ID : VN7CZA2T6N8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		97855.02	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Margaret Hane		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1953	Transaction ID : VN7CZA2T7J7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		97855.02	

Full Name (Last, First, Middle Initial) of Payee Carolyn Happer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2815 Briar Park Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32833-5521	Transaction ID : VN7CZA2V5A7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Carolyn Happer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2815 Briar Park Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32833-5521	Transaction ID : VN7CZA2V6F9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Beenah Harrell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TXX0
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Beenah Harrell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TJ7
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Beenah Harrell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V184
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Beenah Harrell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tyler Harris		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2437 Robertson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45212-3410	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tyler Harris		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2437 Robertson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45212-3410	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tyler Harris		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2437 Robertson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45212-3410	Transaction ID : VN7CZA2V049
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tyler Harris		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2437 Robertson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45212-3410	Transaction ID : VN7CZA2V1T4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Anthony Harrison		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3124 Sedgefield Gate Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-6103	Transaction ID : VN7CZA33NW5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Anthony Harrison		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3124 Sedgefield Gate Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-6103	Transaction ID : VN7CZA33P98
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

Full Name (Last, First, Middle Initial) of Payee Anthony Harrison		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3124 Sedgefield Gate Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-6103	Transaction ID : VN7CZA33QG6
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Full Name (Last, First, Middle Initial) of Payee Anthony Harrison		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3124 Sedgefield Gate Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-6103	Transaction ID : VN7CZA33QX7
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shenae Harrison		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7515 Roslyn St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15218-2518	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T4C3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Shenae Harrison		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7515 Roslyn St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15218-2518	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T5B8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Shenae Harrison		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7515 Roslyn St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15218-2518	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T693
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shenae Harrison		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7515 Roslyn St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15218-2518	Transaction ID : VN7CZA2T762
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		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 Harry		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 336 E Elma Ave		Amount 44.58	
City Laurel Springs	State NJ	Zip Code 08021-2110	Transaction ID : VN7CZA2SWP4
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		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 Harry		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 336 E Elma Ave		Amount 44.58	
City Laurel Springs	State NJ	Zip Code 08021-2110	Transaction ID : VN7CZA2SXF1
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	123.36
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Harry		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 336 E Elma Ave		Amount 44.58	
City Laurel Springs	State NJ	Zip Code 08021-2110	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SY89
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		97855.02	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Michael Harry		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 336 E Elma Ave		Amount 44.58	
City Laurel Springs	State NJ	Zip Code 08021-2110	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SZ16
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		97855.02	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Saria Hassan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TY38
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	99.85
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Saria Hassan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2TZR4

Full Name (Last, First, Middle Initial) of Payee Saria Hassan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Transaction ID : VN7CZA2V1E1

Full Name (Last, First, Middle Initial) of Payee Saria Hassan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Transaction ID : VN7CZA2V338

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.07
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee DeSota Haun		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7187 Creekberry Ct		Amount 34.20	
City Pickerington	State OH	Zip Code 43147-7885	Transaction ID : VN7CZA2T973
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee DeSota Haun		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7187 Creekberry Ct		Amount 34.20	
City Pickerington	State OH	Zip Code 43147-7885	Transaction ID : VN7CZA2TAC6
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee DeSota Haun		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7187 Creekberry Ct		Amount 34.20	
City Pickerington	State OH	Zip Code 43147-7885	Transaction ID : VN7CZA2TBG0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee DeSota Haun		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7187 Creekberry Ct		Amount 34.20	
City Pickerington	State OH	Zip Code 43147-7885	Transaction ID : VN7CZA2TCM3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA33R92
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA33RA0
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	56.38
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA33RB7
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA33RG7
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA33RH5
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.27
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA33RJ3
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA33S53
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA33S61
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.27
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA33S79
Purpose of Expenditure Lodging	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA33SC8
Purpose of Expenditure Lodging	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA33SD6
Purpose of Expenditure Lodging	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.27
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA33SE4
Purpose of Expenditure Lodging	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Healy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TXD4
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Healy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZ38
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.49
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee John Healy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V0S5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Healy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V2E2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Hemingway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA33P64
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jonathan Hemingway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA33PK7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Hemingway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA33QT5
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Hemingway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA33R76
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jamie Herndon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2625 Butler Rd		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27516-5703	Transaction ID : VN7CZA2TFK1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jamie Herndon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2625 Butler Rd		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27516-5703	Transaction ID : VN7CZA2TGH8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jamie Herndon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2625 Butler Rd		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27516-5703	Transaction ID : VN7CZA2TKB6
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jamie Herndon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2625 Butler Rd		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27516-5703	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TM93

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 39.65	
City Cleveland	State OH	Zip Code 44115-2615	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SMX2

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 39.65	
City Cleveland	State OH	Zip Code 44115-2615	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SPE8

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.10
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 39.65	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA2SQZ5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 39.65	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA2SSG0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sharlene Hicks		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 720 S Eureka Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43204-2914	Transaction ID : VN7CZA2T9J0
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	113.50
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Sharlene Hicks		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 720 S Eureka Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43204-2914	Transaction ID : VN7CZA2TAQ3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sharlene Hicks		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 720 S Eureka Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43204-2914	Transaction ID : VN7CZA2TBV7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sharlene Hicks		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 720 S Eureka Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43204-2914	Transaction ID : VN7CZA2TCZ9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Leslie Hoffman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 601 N Beatty St Apt ZR		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15206-2483	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T4Y5

Full Name (Last, First, Middle Initial) of Payee Leslie Hoffman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 601 N Beatty St Apt ZR		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15206-2483	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T5X8

Full Name (Last, First, Middle Initial) of Payee Leslie Hoffman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 601 N Beatty St Apt ZR		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15206-2483	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T6V5

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Leslie Hoffman		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 601 N Beatty St Apt ZR		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15206-2483	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2T7R4

Full Name (Last, First, Middle Initial) of Payee Homewood Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5893 American Way		Amount 36.84	
City Orlando	State FL	Zip Code 32819-8201	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2V761

Full Name (Last, First, Middle Initial) of Payee Homewood Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5893 American Way		Amount 36.84	
City Orlando	State FL	Zip Code 32819-8201	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2V7F2

(a) SUBTOTAL of Itemized Independent Expenditures.....	107.88
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Stephanie Honeycutt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3254 W 38th St Down		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-1373	Transaction ID : VN7CZA2SP64
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Stephanie Honeycutt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3254 W 38th St Down		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-1373	Transaction ID : VN7CZA2SQQ1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Stephanie Honeycutt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3254 W 38th St Down		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-1373	Transaction ID : VN7CZA2SS87
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Stephanie Honeycutt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3254 W 38th St Down		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-1373	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Hooker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 901 Chalk Level Rd Apt B15		Amount 22.80	
City Durham	State NC	Zip Code 27704-1632	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Hooker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 901 Chalk Level Rd Apt B15		Amount 22.80	
City Durham	State NC	Zip Code 27704-1632	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee John Hooker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 901 Chalk Level Rd Apt B15		Amount 22.80	
City Durham	State NC	Zip Code 27704-1632	Transaction ID : VN7CZA2TK41
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Hooker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 901 Chalk Level Rd Apt B15		Amount 22.80	
City Durham	State NC	Zip Code 27704-1632	Transaction ID : VN7CZA2TM28
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jeremy Horne		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5116 Hawaiian Ter Apt 2		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1166	Transaction ID : VN7CZA2TXT7
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jeremy Horne		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5116 Hawaiian Ter Apt 2		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1166	Transaction ID : VN7CZA2TZF3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jeremy Horne		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5116 Hawaiian Ter Apt 2		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1166	Transaction ID : VN7CZA2V150
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jeremy Horne		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5116 Hawaiian Ter Apt 2		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1166	Transaction ID : VN7CZA2V2T7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Hassan Houze		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 727 Verona Blvd.		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15235	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T535
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Hassan Houze		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 727 Verona Blvd.		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15235	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T628
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Hassan Houze		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 727 Verona Blvd.		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15235	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T705
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Hassan Houze		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 727 Verona Blvd.		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15235	Transaction ID : VN7CZA2T7X4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marcus Howell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 101 Roup Ave Apt 3		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15206-3437	Transaction ID : VN7CZA2T4Q0
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marcus Howell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 101 Roup Ave Apt 3		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15206-3437	Transaction ID : VN7CZA2T5P3
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Marcus Howell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 101 Roup Ave Apt 3		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15206-3437	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T6M0
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Marcus Howell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 101 Roup Ave Apt 3		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15206-3437	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T7H9
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Nathan Hubbell-Staebler		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2010 Corning Ave		Amount 39.67	
City Cleveland	State OH	Zip Code 44109-1721	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SN14
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	108.07
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Nathan Hubbell-Staebler		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2010 Corning Ave		Amount 39.67	
City Cleveland	State OH	Zip Code 44109-1721	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald 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)	
		501553.03	

Transaction ID : VN7CZA2SPJ9

Full Name (Last, First, Middle Initial) of Payee Nathan Hubbell-Staebler		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2010 Corning Ave		Amount 39.67	
City Cleveland	State OH	Zip Code 44109-1721	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		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)	
		357210.83	

Transaction ID : VN7CZA2SR36

Full Name (Last, First, Middle Initial) of Payee Nathan Hubbell-Staebler		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2010 Corning Ave		Amount 39.67	
City Cleveland	State OH	Zip Code 44109-1721	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input 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)	
		357210.83	

Transaction ID : VN7CZA2SSM1

(a) SUBTOTAL of Itemized Independent Expenditures.....	119.01
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Justin Hullum		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1859 W 58th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3252	Transaction ID : VN7CZA2SN97
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Justin Hullum		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1859 W 58th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3252	Transaction ID : VN7CZA2SPT2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Justin Hullum		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1859 W 58th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3252	Transaction ID : VN7CZA2SRB9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Justin Hullum		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1859 W 58th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3252	Transaction ID : VN7CZA2SSW5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Full Name (Last, First, Middle Initial) of Payee Charles Hunt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27514-7033	Transaction ID : VN7CZA2TEX9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

Full Name (Last, First, Middle Initial) of Payee Charles Hunt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27514-7033	Transaction ID : VN7CZA2TFV4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Charles Hunt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27514-7033	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TJN2

Full Name (Last, First, Middle Initial) of Payee Charles Hunt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27514-7033	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TKK9

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TY53

(a) SUBTOTAL of Itemized Independent Expenditures.....	56.29
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZT0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V1G7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V353
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.07
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Muhammad Ibn Hayes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1842 E Allegheny Ave		Amount 34.20	
City Philadelphia	State PA	Zip Code 19134-3120	Transaction ID : VN7CZA2SWN6
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Muhammad Ibn Hayes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1842 E Allegheny Ave		Amount 34.20	
City Philadelphia	State PA	Zip Code 19134-3120	Transaction ID : VN7CZA2SXE3
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Muhammad Ibn Hayes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1842 E Allegheny Ave		Amount 34.20	
City Philadelphia	State PA	Zip Code 19134-3120	Transaction ID : VN7CZA2SY71
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Muhammad Ibn Hayes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1842 E Allegheny Ave		Amount 34.20	
City Philadelphia	State PA	Zip Code 19134-3120	Transaction ID : VN7CZA2SZ08
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ikea Johnson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6737 S Bell Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60636-2524	Transaction ID : VN7CZA2SK26
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 32483.71		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ikea Johnson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6737 S Bell Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60636-2524	Transaction ID : VN7CZA2SKC5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 32483.71		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	152.90
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Donald Jackson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 266 Albion Pl		Amount 34.20	
City Cincinnati	State OH	Zip Code 45219-2902	Transaction ID : VN7CZA2TXR1
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Donald Jackson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 266 Albion Pl		Amount 34.20	
City Cincinnati	State OH	Zip Code 45219-2902	Transaction ID : VN7CZA2TZD7
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Donald Jackson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 266 Albion Pl		Amount 34.20	
City Cincinnati	State OH	Zip Code 45219-2902	Transaction ID : VN7CZA2V134
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Donald Jackson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 266 Albion Pl		Amount 34.20	
City Cincinnati	State OH	Zip Code 45219-2902	Transaction ID : VN7CZA2V2R1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Roseanna Jackson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3118 Pell Mell Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32818-2800	Transaction ID : VN7CZA2V508
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Roseanna Jackson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3118 Pell Mell Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32818-2800	Transaction ID : VN7CZA2V650
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kymberly Jacobs		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 280 W Johnstown Rd Apt D		Amount 39.63	
City Gahanna	State OH	Zip Code 43230-2762	Transaction ID : VN7CZA2T9A7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kymberly Jacobs		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 280 W Johnstown Rd Apt D		Amount 39.63	
City Gahanna	State OH	Zip Code 43230-2762	Transaction ID : VN7CZA2TAF9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kymberly Jacobs		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 280 W Johnstown Rd Apt D		Amount 39.63	
City Gahanna	State OH	Zip Code 43230-2762	Transaction ID : VN7CZA2TBK4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	118.89
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kymberly Jacobs		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 280 W Johnstown Rd Apt D		Amount 39.63	
City Gahanna	State OH	Zip Code 43230-2762	Transaction ID : VN7CZA2TCQ6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		357210.83	

Full Name (Last, First, Middle Initial) of Payee Jessie Jean-Baptiste		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 47.06	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA2V565
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Jessie Jean-Baptiste		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 47.06	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA2V6B7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	133.75
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kaisey Jefferson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4242 Honey Bee Ct		Amount 34.20	
City Grove City	State OH	Zip Code 43123-8497	Transaction ID : VN7CZA2T9W9
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kaisey Jefferson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4242 Honey Bee Ct		Amount 34.20	
City Grove City	State OH	Zip Code 43123-8497	Transaction ID : VN7CZA2TB12
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kaisey Jefferson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4242 Honey Bee Ct		Amount 34.20	
City Grove City	State OH	Zip Code 43123-8497	Transaction ID : VN7CZA2TC54
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kaisey Jefferson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4242 Honey Bee Ct		Amount 34.20	
City Grove City	State OH	Zip Code 43123-8497	Transaction ID : VN7CZA2TD98
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jimit Sunoco		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2904 Fifth Ave.		Amount 2.42	
City White Oak	State PA	Zip Code 15131	Transaction ID : VN7CZA2T881
Purpose of Expenditure Gas	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jimit Sunoco		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2904 Fifth Ave.		Amount 2.42	
City White Oak	State PA	Zip Code 15131	Transaction ID : VN7CZA2T8H2
Purpose of Expenditure Gas	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.04
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jimit Sunoco		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2904 Fifth Ave.		Amount 2.58	
City White Oak	State PA	Zip Code 15131	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA2T8V9
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Jimit Sunoco		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2904 Fifth Ave.		Amount 2.58	
City White Oak	State PA	Zip Code 15131	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA2T940
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Altrese Johnson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 54 Wilbe Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32805-1749	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V5F6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.36
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Altrese Johnson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 54 Wilbe Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32805-1749	Transaction ID : VN7CZA2V6M8
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Donald Johnson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2424 N 4th St		Amount 39.63	
City Columbus	State OH	Zip Code 43202-2707	Transaction ID : VN7CZA2T981
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Donald Johnson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2424 N 4th St		Amount 39.63	
City Columbus	State OH	Zip Code 43202-2707	Transaction ID : VN7CZA2TAD4
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	113.46
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Donald Johnson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2424 N 4th St		Amount 39.63	
City Columbus	State OH	Zip Code 43202-2707	Transaction ID : VN7CZA2TBH8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Donald Johnson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2424 N 4th St		Amount 39.63	
City Columbus	State OH	Zip Code 43202-2707	Transaction ID : VN7CZA2TCN0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Paris Johnson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address PO Box 201504		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-8108	Transaction ID : VN7CZA2SNC1
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	113.46
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Paris Johnson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address PO Box 201504		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-8108	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SPX6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Paris Johnson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address PO Box 201504		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-8108	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SRE3
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Paris Johnson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address PO Box 201504		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-8108	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SSZ8
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA33P31
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		9506.60	

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA33PG3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		9506.60	

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA33QQ1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA33R42
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee William Jordan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 722 Atwood Rd		Amount 34.20	
City Philadelphia	State PA	Zip Code 19151-3702	Transaction ID : VN7CZA2SWT5
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee William Jordan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 722 Atwood Rd		Amount 34.20	
City Philadelphia	State PA	Zip Code 19151-3702	Transaction ID : VN7CZA2SXK3
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee William Jordan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 722 Atwood Rd		Amount 34.20	
City Philadelphia	State PA	Zip Code 19151-3702	Transaction ID : VN7CZA2SYC0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		97855.02	

Full Name (Last, First, Middle Initial) of Payee William Jordan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 722 Atwood Rd		Amount 34.20	
City Philadelphia	State PA	Zip Code 19151-3702	Transaction ID : VN7CZA2SZ58
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		97855.02	

Full Name (Last, First, Middle Initial) of Payee Dominique Jordan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1754 Lee Rd		Amount 39.65	
City Cleveland	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA2SMY0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	108.05
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Dominique Jordan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1754 Lee Rd		Amount 39.65	
City Cleveland	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA2SPF5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dominique Jordan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1754 Lee Rd		Amount 39.65	
City Cleveland	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA2SR03
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dominique Jordan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1754 Lee Rd		Amount 39.65	
City Cleveland	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA2SSH8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	118.95
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Brendan Joyce		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1897 W 74th St Apt 6		Amount 39.65	
City Cleveland	State OH	Zip Code 44102-2982	Transaction ID : VN7CZA2SN30
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brendan Joyce		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1897 W 74th St Apt 6		Amount 39.65	
City Cleveland	State OH	Zip Code 44102-2982	Transaction ID : VN7CZA2SPM5
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brendan Joyce		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1897 W 74th St Apt 6		Amount 39.65	
City Cleveland	State OH	Zip Code 44102-2982	Transaction ID : VN7CZA2SR52
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	118.95
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Brendan Joyce		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1897 W 74th St Apt 6		Amount 39.65	
City Cleveland	State OH	Zip Code 44102-2982	Transaction ID : VN7CZA2SSP7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 357210.83			

Full Name (Last, First, Middle Initial) of Payee Douglas Karel		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7841 Fairwind Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43235-4525	Transaction ID : VN7CZA2TA19
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 501553.03			

Full Name (Last, First, Middle Initial) of Payee Douglas Karel		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7841 Fairwind Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43235-4525	Transaction ID : VN7CZA2TB61
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 501553.03			

(a) SUBTOTAL of Itemized Independent Expenditures.....	108.05
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Douglas Karel		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7841 Fairwind Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43235-4525	Transaction ID : VN7CZA2TCA4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Douglas Karel		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7841 Fairwind Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43235-4525	Transaction ID : VN7CZA2TDE8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Vince Karlen		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 522 S Melville St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19143-2110	Transaction ID : VN7CZA2SWQ1
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Vince Karlen		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 522 S Melville St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19143-2110	Transaction ID : VN7CZA2SXG9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Vince Karlen		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 522 S Melville St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19143-2110	Transaction ID : VN7CZA2SY96
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Vince Karlen		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 522 S Melville St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19143-2110	Transaction ID : VN7CZA2SZ24
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Robert Keegan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1989 W 58th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3263	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SNW7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Robert Keegan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1989 W 58th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3263	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SQD2
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Robert Keegan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1989 W 58th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3263	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SRY0
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Robert Keegan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1989 W 58th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3263	Transaction ID : VN7CZA2STF5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lydia Kelly		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 18915 Detroit Ext Apt 601		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-3242	Transaction ID : VN7CZA2SNP0
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lydia Kelly		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 18915 Detroit Ext Apt 601		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-3242	Transaction ID : VN7CZA2SQ75
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Lydia Kelly		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 18915 Detroit Ext Apt 601		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-3242	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lydia Kelly		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 18915 Detroit Ext Apt 601		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-3242	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Taylor Kern		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Taylor Kern		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA2TY87
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Taylor Kern		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA2TZ4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Taylor Kern		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA2V1K0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Eva Keys		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12006 Larimore Rd		Amount 4.17	
City Saint Louis	State MO	Zip Code 63138-3122	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TRT5
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

Full Name (Last, First, Middle Initial) of Payee Eva Keys		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12006 Larimore Rd		Amount 4.17	
City Saint Louis	State MO	Zip Code 63138-3122	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TSD5
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

Full Name (Last, First, Middle Initial) of Payee Eva Keys		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12006 Larimore Rd		Amount 4.17	
City Saint Louis	State MO	Zip Code 63138-3122	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TV73
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		50153.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Eva Keys		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12006 Larimore Rd		Amount 4.17	
City Saint Louis	State MO	Zip Code 63138-3122	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TVT1

Full Name (Last, First, Middle Initial) of Payee Matthew King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 52 Locust St		Amount 34.20	
City Etna	State PA	Zip Code 15223-2175	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T4G5

Full Name (Last, First, Middle Initial) of Payee Matthew King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 52 Locust St		Amount 34.20	
City Etna	State PA	Zip Code 15223-2175	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T5F9

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.57
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Matthew King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 52 Locust St		Amount 34.20	
City Etna	State PA	Zip Code 15223-2175	Transaction ID : VN7CZA2T6D4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Matthew King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 52 Locust St		Amount 34.20	
City Etna	State PA	Zip Code 15223-2175	Transaction ID : VN7CZA2T7A4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA2TF19
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TFZ6
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TJS4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TKQ1
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.17	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA2TRY6
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		9506.60	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.17	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA2TSH6
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		9506.60	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.17	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA2TVB4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		50153.03	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.17	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA2TVY3
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27609-7767	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2T0F7
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27609-7767	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2T0M7
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.77
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27609-7767	Transaction ID : VN7CZA2T135
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 22.80	
City Raleigh	State NC	Zip Code 27609-7767	Transaction ID : VN7CZA2T185
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brittany Knott		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TX76
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Brittany Knott		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TYX1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brittany Knott		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V0K8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brittany Knott		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V284
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Faessler Kollin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5926 Mausser Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-2922	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V5H2

Full Name (Last, First, Middle Initial) of Payee Faessler Kollin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5926 Mausser Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-2922	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V6P4

Full Name (Last, First, Middle Initial) of Payee Kristofer Kotlarik		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1126 Bryden Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43205-1822	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T9F7

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kristofer Kotlarik		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1126 Bryden Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43205-1822	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TAM9

Full Name (Last, First, Middle Initial) of Payee Kristofer Kotlarik		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1126 Bryden Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43205-1822	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TBR3

Full Name (Last, First, Middle Initial) of Payee Kristofer Kotlarik		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1126 Bryden Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43205-1822	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TCW6

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Nery Lam		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3845 Goose Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32822-7715	Transaction ID : VN7CZA2V5D0
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nery Lam		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3845 Goose Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32822-7715	Transaction ID : VN7CZA2V6J3
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Manuel Lampon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2313 N Park Ave Apt 1		Amount 34.20	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA2SWA9
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Manuel Lampon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2313 N Park Ave Apt 1		Amount 34.20	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA2SX36
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Manuel Lampon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2313 N Park Ave Apt 1		Amount 34.20	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA2SXW4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Manuel Lampon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2313 N Park Ave Apt 1		Amount 34.20	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA2SYN1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Powers Latasha		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 217 Hastings St		Amount 34.20	
City Orlando	State FL	Zip Code 32808	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V5Q9
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Powers Latasha		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 217 Hastings St		Amount 34.20	
City Orlando	State FL	Zip Code 32808	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V6W2
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Wilburt Laore		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5228 Cinderlane Pkwy		Amount 10.69	
City Orlando	State FL	Zip Code 32808-1024	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V5T3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.09
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Wilburt Laurore		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5228 Cinderlane Pkwy		Amount 10.69	
City Orlando	State FL	Zip Code 32808-1024	Transaction ID : VN7CZA2V6Z5
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Eric Law		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 180 Belvidere Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43223-1157	Transaction ID : VN7CZA2T9M6
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Eric Law		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 180 Belvidere Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43223-1157	Transaction ID : VN7CZA2TAS8
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.09
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Eric Law		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 180 Belvidere Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43223-1157	Transaction ID : VN7CZA2TBX1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Law		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 180 Belvidere Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43223-1157	Transaction ID : VN7CZA2TD15
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jacob Lawrence		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 920 Reiss St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15212-1559	Transaction ID : VN7CZA2T4W9
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jacob Lawrence		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 920 Reiss St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15212-1559	Transaction ID : VN7CZA2T5V2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jacob Lawrence		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 920 Reiss St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15212-1559	Transaction ID : VN7CZA2T6S9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jacob Lawrence		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 920 Reiss St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15212-1559	Transaction ID : VN7CZA2T7P8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tafyah Lawson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3752 E 127th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2978	Transaction ID : VN7CZA2SNT2
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tafyah Lawson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3752 E 127th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2978	Transaction ID : VN7CZA2SQB7
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tafyah Lawson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3752 E 127th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2978	Transaction ID : VN7CZA2SRW4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tafyah Lawson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3752 E 127th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2978	Transaction ID : VN7CZA2STD9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee David Lebel		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5972 Paint Creek Way		Amount 34.20	
City Hilliard	State OH	Zip Code 43026-7735	Transaction ID : VN7CZA2T9E9
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee David Lebel		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5972 Paint Creek Way		Amount 34.20	
City Hilliard	State OH	Zip Code 43026-7735	Transaction ID : VN7CZA2TAK1
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee David Lebel		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5972 Paint Creek Way		Amount 34.20	
City Hilliard	State OH	Zip Code 43026-7735	Transaction ID : VN7CZA2TBQ5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee David Lebel		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5972 Paint Creek Way		Amount 34.20	
City Hilliard	State OH	Zip Code 43026-7735	Transaction ID : VN7CZA2TCV8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Damir Lewis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1979 Plymouth St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19138-2721	Transaction ID : VN7CZA2SWX9
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Damir Lewis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1979 Plymouth St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19138-2721	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SXP6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Damir Lewis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1979 Plymouth St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19138-2721	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SYF4
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		97855.02	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Damir Lewis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1979 Plymouth St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19138-2721	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SZ81
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		97855.02	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Johnny Lewis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1202 Marlowe Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-2628	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SMW5
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Johnny Lewis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1202 Marlowe Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-2628	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SPD0
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Johnny Lewis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1202 Marlowe Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-2628	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SQY7
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Johnny Lewis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1202 Marlowe Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-2628	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SSF2	

Full Name (Last, First, Middle Initial) of Payee Joshua Lewis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 39.63	
City Cleveland	State OH	Zip Code 44115-2615	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SN06	

Full Name (Last, First, Middle Initial) of Payee Joshua Lewis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 39.63	
City Cleveland	State OH	Zip Code 44115-2615	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SPH1	

(a) SUBTOTAL of Itemized Independent Expenditures.....	113.46
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Joshua Lewis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 39.63	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA2SR28
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		357210.83	

Full Name (Last, First, Middle Initial) of Payee Joshua Lewis		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 39.63	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA2SSK3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		357210.83	

Full Name (Last, First, Middle Initial) of Payee Amir Longhorne		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 830 W Market St		Amount 7.13	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA33P07
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		9506.60	

(a) SUBTOTAL of Itemized Independent Expenditures.....	86.39
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Amir Longhorne		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 830 W Market St		Amount 7.13	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA33PD0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Amir Longhorne		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 830 W Market St		Amount 7.13	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA33QM8
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Amir Longhorne		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 830 W Market St		Amount 7.13	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA33R18
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.39
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Bwanali Longwe		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2650 W Greenleaf Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60645-3291	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TF27
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		9506.60	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Bwanali Longwe		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2650 W Greenleaf Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60645-3291	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TG04
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		9506.60	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Bwanali Longwe		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2650 W Greenleaf Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60645-3291	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TJT2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		50153.03	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Bwanali Longwe		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2650 W Greenleaf Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60645-3291	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TKR9

Full Name (Last, First, Middle Initial) of Payee Bwanali Longwe		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2650 W Greenleaf Ave		Amount 4.17	
City Chicago	State IL	Zip Code 60645-3291	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TS02

Full Name (Last, First, Middle Initial) of Payee Bwanali Longwe		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2650 W Greenleaf Ave		Amount 4.17	
City Chicago	State IL	Zip Code 60645-3291	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TSK2

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.14
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Bwanali Longwe		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2650 W Greenleaf Ave		Amount 4.17	
City Chicago	State IL	Zip Code 60645-3291	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Full Name (Last, First, Middle Initial) of Payee Bwanali Longwe		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2650 W Greenleaf Ave		Amount 4.17	
City Chicago	State IL	Zip Code 60645-3291	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Full Name (Last, First, Middle Initial) of Payee Takia Lynn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4700 Quincy Ave Apt 2240		Amount 34.20	
City Cleveland	State OH	Zip Code 44104-1237	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	42.54
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Takia Lynn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4700 Quincy Ave Apt 2240		Amount 34.20	
City Cleveland	State OH	Zip Code 44104-1237	Transaction ID : VN7CZA2SQW1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Takia Lynn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4700 Quincy Ave Apt 2240		Amount 34.20	
City Cleveland	State OH	Zip Code 44104-1237	Transaction ID : VN7CZA2SSD6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		357210.83	

Full Name (Last, First, Middle Initial) of Payee Takia Lynn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4700 Quincy Ave Apt 2240		Amount 34.20	
City Cleveland	State OH	Zip Code 44104-1237	Transaction ID : VN7CZA2STY3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		357210.83	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Krista Madden		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2777 Indianola Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43202-2373	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T9S6

Full Name (Last, First, Middle Initial) of Payee Krista Madden		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2777 Indianola Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43202-2373	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TAY8

Full Name (Last, First, Middle Initial) of Payee Krista Madden		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2777 Indianola Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43202-2373	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TC20

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Krista Madden		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2777 Indianola Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43202-2373	Transaction ID : VN7CZA2TD65
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 22.80	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA2TFM9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 22.80	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA2TGJ6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 22.80	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA2TKC4
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 22.80	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA2TMA1
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 4.17	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA2TS77
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.77
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 4.17	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA2TST7
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 4.17	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA2TVM4
Purpose of Expenditure Per Diem	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 4.17	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA2TW74
Purpose of Expenditure Per Diem	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tanda Makupson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1428 Golden Gate Blvd		Amount 34.20	
City Mayfield Hts	State OH	Zip Code 44124-6832	Transaction ID : VN7CZA2SNG3
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tanda Makupson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1428 Golden Gate Blvd		Amount 34.20	
City Mayfield Hts	State OH	Zip Code 44124-6832	Transaction ID : VN7CZA2SQ18
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tanda Makupson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1428 Golden Gate Blvd		Amount 34.20	
City Mayfield Hts	State OH	Zip Code 44124-6832	Transaction ID : VN7CZA2SRJ5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tanda Makupson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1428 Golden Gate Blvd		Amount 34.20	
City Mayfield Hts	State OH	Zip Code 44124-6832	Transaction ID : VN7CZA2ST30
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marathon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3500 Forbes Ave		Amount 8.26	
City Pittsburgh	State PA	Zip Code 15213-3307	Transaction ID : VN7CZA2T898
Purpose of Expenditure Gas	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marathon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3500 Forbes Ave		Amount 8.26	
City Pittsburgh	State PA	Zip Code 15213-3307	Transaction ID : VN7CZA2T8J0
Purpose of Expenditure Gas	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	50.72
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Marathon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3500 Forbes Ave		Amount 8.83	
City Pittsburgh	State PA	Zip Code 15213-3307	Transaction ID : VN7CZA2T8W7
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marathon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3500 Forbes Ave		Amount 8.83	
City Pittsburgh	State PA	Zip Code 15213-3307	Transaction ID : VN7CZA2T958
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Talvin Mays		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 22.80	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA2TET6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	40.46
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Talvin Mays		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 22.80	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA2TFR1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 9506.60			

Full Name (Last, First, Middle Initial) of Payee Talvin Mays		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 22.80	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA2TJJ9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 501553.03			

Full Name (Last, First, Middle Initial) of Payee Talvin Mays		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 22.80	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA2TKG6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 501553.03			

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Talvin Mays		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 4.17	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA2TS51
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		9506.60	

Full Name (Last, First, Middle Initial) of Payee Talvin Mays		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 4.17	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA2TSR2
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		9506.60	

Full Name (Last, First, Middle Initial) of Payee Talvin Mays		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 4.17	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA2TVJ8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		50153.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Talvin Mays		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 4.17	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA2TW58
Purpose of Expenditure Per Diem	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hope McCain		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1389 E 171st St		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2525	Transaction ID : VN7CZA2SN64
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hope McCain		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1389 E 171st St		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2525	Transaction ID : VN7CZA2SPQ9
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.57
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Hope McCain		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1389 E 171st St		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2525	Transaction ID : VN7CZA2SR86
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hope McCain		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1389 E 171st St		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2525	Transaction ID : VN7CZA2SSS1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marnetta McCain		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 252 E 244th St Apt 206		Amount 34.20	
City Euclid	State OH	Zip Code 44123-1463	Transaction ID : VN7CZA2SNK6
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Marnetta McCain		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 252 E 244th St Apt 206		Amount 34.20	
City Euclid	State OH	Zip Code 44123-1463	Transaction ID : VN7CZA2SQ41
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Marnetta McCain		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 252 E 244th St Apt 206		Amount 34.20	
City Euclid	State OH	Zip Code 44123-1463	Transaction ID : VN7CZA2SRN8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Marnetta McCain		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 252 E 244th St Apt 206		Amount 34.20	
City Euclid	State OH	Zip Code 44123-1463	Transaction ID : VN7CZA2ST64
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Razzah McDade		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4532 Commander Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-3666	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V581

Full Name (Last, First, Middle Initial) of Payee Razzah McDade		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4532 Commander Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-3666	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V6D3

Full Name (Last, First, Middle Initial) of Payee Jason McDaniel		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 658 SE 148th Ave		Amount 6.25	
City Portland	State OR	Zip Code 97233-2588	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T041

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.65
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jason McDaniel		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 658 SE 148th Ave		Amount 6.25	
City Portland	State OR	Zip Code 97233-2588	Transaction ID : VN7CZA2T066
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jason McDaniel		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 658 SE 148th Ave		Amount 6.25	
City Portland	State OR	Zip Code 97233-2588	Transaction ID : VN7CZA2T082
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jason McDaniel		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 658 SE 148th Ave		Amount 6.25	
City Portland	State OR	Zip Code 97233-2588	Transaction ID : VN7CZA2T0A8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	18.75
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Richard McDonald		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1365 Marlboro Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-2677	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T4F7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Richard McDonald		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1365 Marlboro Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-2677	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T5E2
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Richard McDonald		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1365 Marlboro Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-2677	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T6C7
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Richard McDonald		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1365 Marlboro Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-2677	Transaction ID : VN7CZA2T796
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA33P56
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA33PJ9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA33QS7
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA33R68
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Linsey McGlocklin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12530 Lake Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1574	Transaction ID : VN7CZA2SP23
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Linsey McGlocklin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12530 Lake Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1574	Transaction ID : VN7CZA2SQK0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Linsey McGlocklin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12530 Lake Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1574	Transaction ID : VN7CZA2SS45
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Linsey McGlocklin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12530 Lake Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1574	Transaction ID : VN7CZA2STN2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Howard McMillan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5907 Lawndale St		Amount 10.69	
City Philadelphia	State PA	Zip Code 19120-1209	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SWZ5

Full Name (Last, First, Middle Initial) of Payee Howard McMillan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5907 Lawndale St		Amount 10.69	
City Philadelphia	State PA	Zip Code 19120-1209	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SXR2

Full Name (Last, First, Middle Initial) of Payee Howard McMillan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5907 Lawndale St		Amount 10.69	
City Philadelphia	State PA	Zip Code 19120-1209	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SYH0

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.07
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Howard McMillan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5907 Lawndale St		Amount 10.69	
City Philadelphia	State PA	Zip Code 19120-1209	Transaction ID : VN7CZA2SAZ7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dominique McQueary		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1621 Harvard Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1249	Transaction ID : VN7CZA2TA43
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dominique McQueary		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1621 Harvard Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1249	Transaction ID : VN7CZA2TB87
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.09
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Dominique McQueary		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1621 Harvard Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1249	Transaction ID : VN7CZA2TCC9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dominique McQueary		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1621 Harvard Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1249	Transaction ID : VN7CZA2TDG4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tierra Mercado		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6104 S. Lufkin		Amount 22.80	
City Chicago	State IL	Zip Code 60636-2332	Transaction ID : VN7CZA2TF43
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tierra Mercado		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6104 S. Luffin		Amount 22.80	
City Chicago	State IL	Zip Code 60636-2332	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TG20
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2016	

Full Name (Last, First, Middle Initial) of Payee Tierra Mercado		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6104 S. Luffin		Amount 22.80	
City Chicago	State IL	Zip Code 60636-2332	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TJW8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2016	

Full Name (Last, First, Middle Initial) of Payee Tierra Mercado		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6104 S. Luffin		Amount 22.80	
City Chicago	State IL	Zip Code 60636-2332	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TKT5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2016	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tierra Mercado		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6104 S. Luflin		Amount 4.17	
City Chicago	State IL	Zip Code 60636-2332	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA2TS36
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		9506.60	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Tierra Mercado		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6104 S. Luflin		Amount 4.17	
City Chicago	State IL	Zip Code 60636-2332	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA2TSP6
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		9506.60	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Tierra Mercado		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6104 S. Luflin		Amount 4.17	
City Chicago	State IL	Zip Code 60636-2332	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA2TVG2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tierra Mercado		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6104 S. Luffin		Amount 4.17	
City Chicago	State IL	Zip Code 60636-2332	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TW32
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Day Metvier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 10949 Oberlin Rd		Amount 34.20	
City Oberlin	State OH	Zip Code 44074-9771	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SNS4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Day Metvier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 10949 Oberlin Rd		Amount 34.20	
City Oberlin	State OH	Zip Code 44074-9771	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SQA9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.57
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Day Metvier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 10949 Oberlin Rd		Amount 34.20	
City Oberlin	State OH	Zip Code 44074-9771	Transaction ID : VN7CZA2SRV6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Day Metvier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 10949 Oberlin Rd		Amount 34.20	
City Oberlin	State OH	Zip Code 44074-9771	Transaction ID : VN7CZA2STC1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Diana Metobob		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2335 N Carlisle St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19132-4515	Transaction ID : VN7CZA2SWB7
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Diana Metobob		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2335 N Carlisle St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19132-4515	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SX44
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Diana Metobob		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2335 N Carlisle St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19132-4515	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SXX2
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		97855.02	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Diana Metobob		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2335 N Carlisle St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19132-4515	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SYP9
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		97855.02	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Sonny Mobley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TXM9
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Sonny Mobley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TZ96
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Sonny Mobley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2V0Z2
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Sonny Mobley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Full Name (Last, First, Middle Initial) of Payee Kayci Moodie		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1920 73rd Ave		Amount 44.58	
City Philadelphia	State PA	Zip Code 19138-2711	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Full Name (Last, First, Middle Initial) of Payee Kayci Moodie		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1920 73rd Ave		Amount 44.58	
City Philadelphia	State PA	Zip Code 19138-2711	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	123.36
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kayci Moodie		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1920 73rd Ave		Amount 44.58	
City Philadelphia	State PA	Zip Code 19138-2711	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SXV6
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		97855.02	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Kayci Moodie		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1920 73rd Ave		Amount 44.58	
City Philadelphia	State PA	Zip Code 19138-2711	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SYM3
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		97855.02	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Sandra Moore		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2623 Oakdale Ave		Amount 34.20	
City Lorain	State OH	Zip Code 44055-1061	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SNE7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	123.36
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Sandra Moore		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2623 Oakdale Ave		Amount 34.20	
City Lorain	State OH	Zip Code 44055-1061	Transaction ID : VN7CZA2SPZ2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sandra Moore		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2623 Oakdale Ave		Amount 34.20	
City Lorain	State OH	Zip Code 44055-1061	Transaction ID : VN7CZA2SRG9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sandra Moore		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2623 Oakdale Ave		Amount 34.20	
City Lorain	State OH	Zip Code 44055-1061	Transaction ID : VN7CZA2ST14
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Daniel Moraff		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 305 Maple Ln		Amount 34.20	
City Sewickley	State PA	Zip Code 15143-1054	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T501
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Daniel Moraff		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 305 Maple Ln		Amount 34.20	
City Sewickley	State PA	Zip Code 15143-1054	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T5Z4
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Daniel Moraff		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 305 Maple Ln		Amount 34.20	
City Sewickley	State PA	Zip Code 15143-1054	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T6X1
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Daniel Moraff		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 305 Maple Ln		Amount 34.20	
City Sewickley	State PA	Zip Code 15143-1054	Transaction ID : VN7CZA2T7T0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Daniel Morasco		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5233 Stanton Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15201-2592	Transaction ID : VN7CZA2T519
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Daniel Morasco		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5233 Stanton Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15201-2592	Transaction ID : VN7CZA2T602
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Daniel Morasco		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5233 Stanton Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15201-2592	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T6Y9
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		97855.02	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Daniel Morasco		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5233 Stanton Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15201-2592	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T7V8
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		97855.02	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Stacey Morgan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TY04
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Stacey Morgan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZN1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Stacey Morgan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V1B7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Stacey Morgan		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V304
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA33SK3
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA33SP7
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA33SZ8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		50153.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33T22

Full Name (Last, First, Middle Initial) of Payee Youssouf Ndiaye		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TXP5

Full Name (Last, First, Middle Initial) of Payee Youssouf Ndiaye		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TZB2

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.57
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Youssouf Ndiaye		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V118
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Youssouf Ndiaye		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V2P5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Letecia Nevels		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3024 Wadlow St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-2402	Transaction ID : VN7CZA2T543
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	136.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Leticia Nevels		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3024 Wadlow St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-2402	Transaction ID : VN7CZA2T635
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		97855.02	

Full Name (Last, First, Middle Initial) of Payee Darius Nixon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3100 Lemay Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27604-1626	Transaction ID : VN7CZA2T0D2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		9506.60	

Full Name (Last, First, Middle Initial) of Payee Darius Nixon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3100 Lemay Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27604-1626	Transaction ID : VN7CZA2T0J1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		9506.60	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.00
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Darius Nixon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3100 Lemay Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27604-1626	Transaction ID : VN7CZA2T110
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Darius Nixon		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3100 Lemay Ct		Amount 22.80	
City Raleigh	State NC	Zip Code 27604-1626	Transaction ID : VN7CZA2T169
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Steven Nourse		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4708 Cadmus Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43228-8404	Transaction ID : VN7CZA2T9H2
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Steven Nourse		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4708 Cadmus Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43228-8404	Transaction ID : VN7CZA2TAP5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Steven Nourse		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4708 Cadmus Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43228-8404	Transaction ID : VN7CZA2TBT9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Steven Nourse		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4708 Cadmus Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43228-8404	Transaction ID : VN7CZA2TCY2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Eladio Olivo Martinez		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6942 Keystone St Apt 2A		Amount 34.20	
City Philadelphia	State PA	Zip Code 19135-2040	Transaction ID : VN7CZA2SWW1
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Eladio Olivo Martinez		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6942 Keystone St Apt 2A		Amount 34.20	
City Philadelphia	State PA	Zip Code 19135-2040	Transaction ID : VN7CZA2SXN8
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Eladio Olivo Martinez		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6942 Keystone St Apt 2A		Amount 34.20	
City Philadelphia	State PA	Zip Code 19135-2040	Transaction ID : VN7CZA2SYE6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Eladio Olivo Martinez		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6942 Keystone St Apt 2A		Amount 34.20	
City Philadelphia	State PA	Zip Code 19135-2040	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2SZ73

Full Name (Last, First, Middle Initial) of Payee William Olsen		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1603 Greenleaf St		Amount 22.80	
City Durham	State NC	Zip Code 27701-1432	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2TFA0

Full Name (Last, First, Middle Initial) of Payee William Olsen		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1603 Greenleaf St		Amount 22.80	
City Durham	State NC	Zip Code 27701-1432	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2TG87

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee William Olsen		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1603 Greenleaf St		Amount 22.80	
City Durham	State NC	Zip Code 27701-1432	Transaction ID : VN7CZA2TK25
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee William Olsen		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1603 Greenleaf St		Amount 22.80	
City Durham	State NC	Zip Code 27701-1432	Transaction ID : VN7CZA2TM02
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shawn Olszewski		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 131 Harcourt Dr		Amount 34.20	
City Akron	State OH	Zip Code 44313-6508	Transaction ID : VN7CZA2SNF5
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shawn Olszewski		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 131 Harcourt Dr		Amount 34.20	
City Akron	State OH	Zip Code 44313-6508	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SQ00
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Shawn Olszewski		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 131 Harcourt Dr		Amount 34.20	
City Akron	State OH	Zip Code 44313-6508	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SRH7
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		357210.83	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Shawn Olszewski		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 131 Harcourt Dr		Amount 34.20	
City Akron	State OH	Zip Code 44313-6508	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2ST22
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		357210.83	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Aida Ortiz		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5924 Auver Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32807-3764	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V599
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Aida Ortiz		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5924 Auver Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32807-3764	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V6E1
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Lesche Owens		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12001 Towa Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SNQ8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Lesche Owens		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12001 Towa Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108	Transaction ID : VN7CZA2SQ83
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Lesche Owens		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12001 Towa Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108	Transaction ID : VN7CZA2SRS0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Lesche Owens		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 12001 Towa Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108	Transaction ID : VN7CZA2STA5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shanell Pack		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7814 Empire Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32810-2618	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shanell Pack		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7814 Empire Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32810-2618	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Richard Palmer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 710 Armandale St		Amount 52.01	
City Pittsburgh	State PA	Zip Code 15212-4078	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	120.41
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Richard Palmer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 710 Armandale St		Amount 52.01	
City Pittsburgh	State PA	Zip Code 15212-4078	Transaction ID : VN7CZA2T5C6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Richard Palmer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 710 Armandale St		Amount 52.01	
City Pittsburgh	State PA	Zip Code 15212-4078	Transaction ID : VN7CZA2T6A1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Richard Palmer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 710 Armandale St		Amount 52.01	
City Pittsburgh	State PA	Zip Code 15212-4078	Transaction ID : VN7CZA2T770
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	156.03
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jasmyn Parham		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TXC6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jasmyn Parham		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZ21
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jasmyn Parham		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V0R7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jasmyn Parham		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V2D4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Pegues		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TXZ6
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Pegues		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZM3
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kevin Pegues		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V1A9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Pegues		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V2Z6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Casohn Peoples		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6802 McKinley Ct		Amount 34.20	
City Clairton	State PA	Zip Code 15025-5149	Transaction ID : VN7CZA2T568
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Casohn Peoples		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6802 McKinley Ct		Amount 34.20	
City Clairton	State PA	Zip Code 15025-5149	Transaction ID : VN7CZA2T651
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Casohn Peoples		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6802 McKinley Ct		Amount 34.20	
City Clairton	State PA	Zip Code 15025-5149	Transaction ID : VN7CZA2T720
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Casohn Peoples		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6802 McKinley Ct		Amount 34.20	
City Clairton	State PA	Zip Code 15025-5149	Transaction ID : VN7CZA2T729
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jared Peters		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7402 Blanding Dr		Amount 22.80	
City Saint Louis	State MO	Zip Code 63135-3446	Transaction ID : VN7CZA2TEZ5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jared Peters		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7402 Blanding Dr		Amount 22.80	
City Saint Louis	State MO	Zip Code 63135-3446	Transaction ID : VN7CZA2TFX0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jared Peters		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7402 Blanding Dr		Amount 22.80	
City Saint Louis	State MO	Zip Code 63135-3446	Transaction ID : VN7CZA2TJQ8
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 50153.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jared Peters		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7402 Blanding Dr		Amount 22.80	
City Saint Louis	State MO	Zip Code 63135-3446	Transaction ID : VN7CZA2TKN5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jared Peters		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7402 Blanding Dr		Amount 4.17	
City Saint Louis	State MO	Zip Code 63135-3446	Transaction ID : VN7CZA2TRS7
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jared Peters		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7402 Blanding Dr		Amount 4.17	
City Saint Louis	State MO	Zip Code 63135-3446	Transaction ID : VN7CZA2TSC7
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.14
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jared Peters		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7402 Blanding Dr		Amount 4.17	
City Saint Louis	State MO	Zip Code 63135-3446	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2TV65	

Full Name (Last, First, Middle Initial) of Payee Jared Peters		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7402 Blanding Dr		Amount 4.17	
City Saint Louis	State MO	Zip Code 63135-3446	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2TVS3	

Full Name (Last, First, Middle Initial) of Payee Philip Piridy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2TX43	

(a) SUBTOTAL of Itemized Independent Expenditures.....	42.54
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Philip Piridy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TYT7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Philip Piridy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V0F6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Philip Piridy		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V251
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 33.02	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA2TER0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 9506.60			

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 33.02	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA2TFP5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 9506.60			

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 33.02	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA2TJG3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 501553.03			

(a) SUBTOTAL of Itemized Independent Expenditures.....	99.06
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 33.02	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA2TKE0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 4.17	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA2TRP3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 4.17	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA2TS93
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.36
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 4.17	
City Portland	State OR	Zip Code 97236-3342	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TV31
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 4.17	
City Portland	State OR	Zip Code 97236-3342	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2V9P
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

Full Name (Last, First, Middle Initial) of Payee Shani Porter		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2610 Donaldson Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32812-8412	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V531
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

(a) SUBTOTAL of Itemized Independent Expenditures.....	42.54
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shani Porter		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2610 Donaldson Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32812-8412	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V684

Full Name (Last, First, Middle Initial) of Payee Latasha Powers		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2117 N Hastings St		Amount 34.20	
City Orlando	State FL	Zip Code 32808-4810	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V5P1

Full Name (Last, First, Middle Initial) of Payee Latasha Powers		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2117 N Hastings St		Amount 34.20	
City Orlando	State FL	Zip Code 32808-4810	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V6V4

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Wisdom Presley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1952 Elston St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19138-2719	Transaction ID : VN7CZA2SWE0
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Wisdom Presley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1952 Elston St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19138-2719	Transaction ID : VN7CZA2SX78
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Wisdom Presley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1952 Elston St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19138-2719	Transaction ID : VN7CZA2SY05
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Wisdom Presley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1952 Elston St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19138-2719	Transaction ID : VN7CZA2SYS3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		97855.02	

Full Name (Last, First, Middle Initial) of Payee Donna Putnam		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1021 Bellows Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43223-1517	Transaction ID : VN7CZA2T9G5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Donna Putnam		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1021 Bellows Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43223-1517	Transaction ID : VN7CZA2TAN7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Donna Putnam		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1021 Bellows Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43223-1517	Transaction ID : VN7CZA2TBS1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Donna Putnam		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1021 Bellows Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43223-1517	Transaction ID : VN7CZA2TCX4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Quarles		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 7.13	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA33NZ9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	75.53
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kevin Quarles		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 7.13	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA33PC2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		9506.60	

Full Name (Last, First, Middle Initial) of Payee Kevin Quarles		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 7.13	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA33QK0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Kevin Quarles		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 7.13	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA33R01
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.39
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Quinn Flagg		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4054 N Sheridan Rd		Amount 17.46	
City Chicago	State IL	Zip Code 60613-2083	Transaction ID : VN7CZA2SJY5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		32483.71	

Full Name (Last, First, Middle Initial) of Payee Quinn Flagg		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4054 N Sheridan Rd		Amount 17.46	
City Chicago	State IL	Zip Code 60613-2083	Transaction ID : VN7CZA2SK84
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		32483.71	

Full Name (Last, First, Middle Initial) of Payee David Rachal		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TX27
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		50153.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	69.12
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee David Rachal		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TYR2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee David Rachal		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V0D0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee David Rachal		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V235
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Rachel King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 72.67	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SJW9	

Full Name (Last, First, Middle Initial) of Payee Rachel King		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 72.67	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SK68	

Full Name (Last, First, Middle Initial) of Payee Sadiqa Rahn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 16104 Scottsdale Blvd		Amount 34.20	
City Cleveland	State OH	Zip Code 44120-5037	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SP15	

(a) SUBTOTAL of Itemized Independent Expenditures.....	179.54
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Sadiqa Rahn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 16104 Scottsdale Blvd		Amount 34.20	
City Cleveland	State OH	Zip Code 44120-5037	Transaction ID : VN7CZA2SQJ2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sadiqa Rahn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 16104 Scottsdale Blvd		Amount 34.20	
City Cleveland	State OH	Zip Code 44120-5037	Transaction ID : VN7CZA2SS39
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sadiqa Rahn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 16104 Scottsdale Blvd		Amount 34.20	
City Cleveland	State OH	Zip Code 44120-5037	Transaction ID : VN7CZA2STM4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 423 Probasco St		Amount 48.32	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA2TWF7
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 423 Probasco St		Amount 48.32	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA2TY61
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 423 Probasco St		Amount 48.32	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA2TZV8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	144.96
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 423 Probasco St		Amount 48.32	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA2V1H5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cindy Reed		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 23116 39th Ave E		Amount 6.25	
City Spanaway	State WA	Zip Code 98387-6964	Transaction ID : VN7CZA2V7K3
Purpose of Expenditure Per Diem	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cindy Reed		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 23116 39th Ave E		Amount 6.25	
City Spanaway	State WA	Zip Code 98387-6964	Transaction ID : VN7CZA2V7M1
Purpose of Expenditure Per Diem	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	60.82
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tameka Reeves		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2176 Haviland Dr Apt 7		Amount 34.20	
City Columbus	State OH	Zip Code 43207-2217	Transaction ID : VN7CZA2T9R8
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tameka Reeves		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2176 Haviland Dr Apt 7		Amount 34.20	
City Columbus	State OH	Zip Code 43207-2217	Transaction ID : VN7CZA2TAX0
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tameka Reeves		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2176 Haviland Dr Apt 7		Amount 34.20	
City Columbus	State OH	Zip Code 43207-2217	Transaction ID : VN7CZA2TC12
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tameka Reeves		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2176 Haviland Dr Apt 7		Amount 34.20	
City Columbus	State OH	Zip Code 43207-2217	Transaction ID : VN7CZA2TD57
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dajion Reid		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1776 18th St.		Amount 34.20	
City Columbus	State OH	Zip Code 43207-2009	Transaction ID : VN7CZA2TA50
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dajion Reid		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1776 18th St.		Amount 34.20	
City Columbus	State OH	Zip Code 43207-2009	Transaction ID : VN7CZA2TB95
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Daijon Reid		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1776 18th St.		Amount 34.20	
City Columbus	State OH	Zip Code 43207-2009	Transaction ID : VN7CZA2TCD7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Daijon Reid		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1776 18th St.		Amount 34.20	
City Columbus	State OH	Zip Code 43207-2009	Transaction ID : VN7CZA2TDH2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jasua Render		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7701 Camden Ave		Amount 39.67	
City Cleveland	State OH	Zip Code 44102-5024	Transaction ID : VN7CZA2SN22
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	108.07
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jasua Render		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7701 Camden Ave		Amount 39.67	
City Cleveland	State OH	Zip Code 44102-5024	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SPK7

Full Name (Last, First, Middle Initial) of Payee Jasua Render		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7701 Camden Ave		Amount 39.67	
City Cleveland	State OH	Zip Code 44102-5024	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SR44

Full Name (Last, First, Middle Initial) of Payee Jasua Render		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7701 Camden Ave		Amount 39.67	
City Cleveland	State OH	Zip Code 44102-5024	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SSN9

(a) SUBTOTAL of Itemized Independent Expenditures.....	119.01
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tarah Reppert		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 740 E Vernon Rd Apt 310		Amount 44.58	
City Philadelphia	State PA	Zip Code 19119-1508	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SW83
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Tarah Reppert		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 740 E Vernon Rd Apt 310		Amount 44.58	
City Philadelphia	State PA	Zip Code 19119-1508	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SX10
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Tarah Reppert		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 740 E Vernon Rd Apt 310		Amount 44.58	
City Philadelphia	State PA	Zip Code 19119-1508	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SXT8
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	133.74
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tarah Reppert		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 740 E Vernon Rd Apt 310		Amount 44.58	
City Philadelphia	State PA	Zip Code 19119-1508	Transaction ID : VN7CZA2SYK5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		97855.02	

Full Name (Last, First, Middle Initial) of Payee Iris Rivera		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7350 Westpointe Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32835-6192	Transaction ID : VN7CZA2V573
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Iris Rivera		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7350 Westpointe Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32835-6192	Transaction ID : VN7CZA2V6C5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	112.98
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Marceia Robinson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 62 N 17th St		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1801	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2T9P2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Marceia Robinson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 62 N 17th St		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1801	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TAV4
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Marceia Robinson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 62 N 17th St		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1801	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TBZ7
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Marceia Robinson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 62 N 17th St		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1801	Transaction ID : VN7CZA2TD31
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Robinson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TXJ3
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Robinson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZ70
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Robinson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V0X7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Robinson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V2J3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA2TFH5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA2TGF2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA2TK90
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA2TM77
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Edlemira Rodriguez		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2322 N 13th St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19133-1011	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SWF8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Edlemira Rodriguez		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2322 N 13th St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19133-1011	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SX86
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Edlemira Rodriguez		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2322 N 13th St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19133-1011	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SY13
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Edlemira Rodriguez		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2322 N 13th St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19133-1011	Transaction ID : VN7CZA2SYT1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jeanette Rose		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5590 Gary Ave		Amount 34.20	
City Bedford	State OH	Zip Code 44146-2453	Transaction ID : VN7CZA2SPC2
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jeanette Rose		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5590 Gary Ave		Amount 34.20	
City Bedford	State OH	Zip Code 44146-2453	Transaction ID : VN7CZA2SQX9
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jeanette Rose		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5590 Gary Ave		Amount 34.20	
City Bedford	State OH	Zip Code 44146-2453	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SSE4
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Jeanette Rose		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5590 Gary Ave		Amount 34.20	
City Bedford	State OH	Zip Code 44146-2453	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2STZ1
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Elijuan Ross		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3554 Farmington Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5884	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA33P23
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Elijuan Ross		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3554 Farmington Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5884	Transaction ID : VN7CZA33PF5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elijuan Ross		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3554 Farmington Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5884	Transaction ID : VN7CZA33QP4
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elijuan Ross		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3554 Farmington Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5884	Transaction ID : VN7CZA33R34
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Johnny Rucker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TXE2
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Johnny Rucker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZ46
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Johnny Rucker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V0T3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Johnny Rucker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V2F0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Forest Ruge-Whitacre		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-3510	Transaction ID : VN7CZA2T4K8
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Forest Ruge-Whitacre		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-3510	Transaction ID : VN7CZA2T5J3
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Forest Ruge-Whitacre		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-3510	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Forest Ruge-Whitacre		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15221-3510	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Luzmeilyn Ruiz		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 451 S Semoran Blvd Apt 101		Amount 47.06	
City Orlando	State FL	Zip Code 32807-4301	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.46
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Luzmeilyn Ruiz		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 451 S Semoran Blvd Apt 101		Amount 47.06	
City Orlando	State FL	Zip Code 32807-4301	Transaction ID : VN7CZA2V5X7
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Leila Russell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1409 Flora Lee Dr		Amount 34.20	
City Leesburg	State FL	Zip Code 34748-3464	Transaction ID : VN7CZA2V5B4
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Leila Russell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1409 Flora Lee Dr		Amount 34.20	
City Leesburg	State FL	Zip Code 34748-3464	Transaction ID : VN7CZA2V6G7
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.46
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Yawo Sadj		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6658 Seahurst Dr		Amount 10.69	
City Canal Winchester	State OH	Zip Code 43110-9017	Transaction ID : VN7CZA2TA92
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Yawo Sadj		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6658 Seahurst Dr		Amount 10.69	
City Canal Winchester	State OH	Zip Code 43110-9017	Transaction ID : VN7CZA2TBD6
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Yawo Sadj		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6658 Seahurst Dr		Amount 10.69	
City Canal Winchester	State OH	Zip Code 43110-9017	Transaction ID : VN7CZA2TCH9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.07
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Yawo Sadi		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6658 Seahurst Dr		Amount 10.69	
City Canal Winchester	State OH	Zip Code 43110-9017	Transaction ID : VN7CZA2TDN3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eva Sadler		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 105 Forestdale Dr		Amount 14.25	
City Jamestown	State NC	Zip Code 27282-9683	Transaction ID : VN7CZA33NY1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eva Sadler		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 105 Forestdale Dr		Amount 14.25	
City Jamestown	State NC	Zip Code 27282-9683	Transaction ID : VN7CZA33PB4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.19
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Eva Sadler		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 105 Forestdale Dr		Amount 14.25	
City Jamestown	State NC	Zip Code 27282-9683	Transaction ID : VN7CZA33QJ2
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Eva Sadler		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 105 Forestdale Dr		Amount 14.25	
City Jamestown	State NC	Zip Code 27282-9683	Transaction ID : VN7CZA33QZ3
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Samuel Ortiz		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7859 BS South Shore Dr. apt 3W		Amount 104.02	
City Chicago	State IL	Zip Code 60649	Transaction ID : VN7CZA2SJZ3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 32483.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	132.52
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Samuel Ortiz		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7859 BS South Shore Dr. apt 3W		Amount 104.02	
City Chicago	State IL	Zip Code 60649	Transaction ID : VN7CZA2SK92
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 32483.71		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address Whisperwood Dr		Amount 7.13	
City Raleigh	State NC	Zip Code 27616	Transaction ID : VN7CZA2T0G5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address Whisperwood Dr		Amount 7.13	
City Raleigh	State NC	Zip Code 27616	Transaction ID : VN7CZA2T0N5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	118.28
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address Whisperwood Dr		Amount 7.13	
City Raleigh	State NC	Zip Code 27616	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T143
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address Whisperwood Dr		Amount 7.13	
City Raleigh	State NC	Zip Code 27616	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T193
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Sarah Jackson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 638 N Saint Louis Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60624-1365	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SK18
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Kirk		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought 32483.71		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.61
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Sarah Jackson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 638 N Saint Louis Ave		Amount 59.35	
City Chicago	State IL	Zip Code 60624-1365	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2SKB7	

Full Name (Last, First, Middle Initial) of Payee Shaakira Sargent		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2TWX7	

Full Name (Last, First, Middle Initial) of Payee Shaakira Sargent		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA2TYK4	

(a) SUBTOTAL of Itemized Independent Expenditures.....	127.75
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shaakira Sargent		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V081
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shaakira Sargent		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V1Y5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Pedro Sarsama		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4507 W 20th St		Amount 27.93	
City Cleveland	State OH	Zip Code 44109-4443	Transaction ID : VN7CZA2SP80
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	96.33
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Pedro Sarsama		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4507 W 20th St		Amount 27.93	
City Cleveland	State OH	Zip Code 44109-4443	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SQS7

Full Name (Last, First, Middle Initial) of Payee Pedro Sarsama		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4507 W 20th St		Amount 27.93	
City Cleveland	State OH	Zip Code 44109-4443	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SSA2

Full Name (Last, First, Middle Initial) of Payee Pedro Sarsama		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4507 W 20th St		Amount 27.93	
City Cleveland	State OH	Zip Code 44109-4443	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2STV9

(a) SUBTOTAL of Itemized Independent Expenditures.....	83.79
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee ZhaiRon Scales		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2308 Argyle Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43219-1404	Transaction ID : VN7CZA2T9V1
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee ZhaiRon Scales		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2308 Argyle Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43219-1404	Transaction ID : VN7CZA2TB04
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee ZhaiRon Scales		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2308 Argyle Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43219-1404	Transaction ID : VN7CZA2TC46
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee ZhaiRon Scales		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2308 Argyle Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43219-1404	Transaction ID : VN7CZA2TD81
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 44.46	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TJ1
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 44.46	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TY95
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	123.12
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 44.46	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZY2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 44.46	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V1M8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Serrin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1730 Gurtler Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32804-6427	Transaction ID : VN7CZA2V5N3
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	123.12
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Serrin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1730 Gurtler Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32804-6427	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V6T6

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3337 Clifton Ave		Amount 10.61	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V3F2

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3337 Clifton Ave		Amount 6.11	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V3G0

(a) SUBTOTAL of Itemized Independent Expenditures.....	50.92
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.80	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2V3H8

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3337 Clifton Ave		Amount 10.61	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2V3V7

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3337 Clifton Ave		Amount 6.11	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2V3W5

(a) SUBTOTAL of Itemized Independent Expenditures.....	26.52
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.80	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3337 Clifton Ave		Amount 10.61	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3337 Clifton Ave		Amount 6.11	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

(a) SUBTOTAL of Itemized Independent Expenditures.....	26.52
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.80	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Transaction ID : VN7CZA2V498

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3337 Clifton Ave		Amount 10.61	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Transaction ID : VN7CZA2V4K7

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3337 Clifton Ave		Amount 6.11	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		357210.83	

Transaction ID : VN7CZA2V4M5

(a) SUBTOTAL of Itemized Independent Expenditures.....	26.52
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.80	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA2V4N3
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 4.61	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA2V778
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 9.09	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA2V786
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	23.50
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 7.30	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2V794

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 4.61	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2V7G0

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 9.09	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2V7H7

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.00
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 7.30	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA2V7J5
Purpose of Expenditure Gas	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gianna Simmons		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 52.01	
City New Florence	State PA	Zip Code 15944-8402	Transaction ID : VN7CZA2T4M6
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gianna Simmons		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 52.01	
City New Florence	State PA	Zip Code 15944-8402	Transaction ID : VN7CZA2T5K1
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	111.32
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Gianna Simmons		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 52.01	
City New Florence	State PA	Zip Code 15944-8402	Transaction ID : VN7CZA2T6H6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gianna Simmons		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 52.01	
City New Florence	State PA	Zip Code 15944-8402	Transaction ID : VN7CZA2T7E5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Christopher Simons		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 731 York Ave		Amount 10.69	
City Swarthmore	State PA	Zip Code 19081	Transaction ID : VN7CZA2SX03
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.71
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Christopher Simons		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 731 York Ave		Amount 10.69	
City Swarthmore	State PA	Zip Code 19081	Transaction ID : VN7CZA2SXS0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Christopher Simons		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 731 York Ave		Amount 10.69	
City Swarthmore	State PA	Zip Code 19081	Transaction ID : VN7CZA2SYJ8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Christopher Simons		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 731 York Ave		Amount 10.69	
City Swarthmore	State PA	Zip Code 19081	Transaction ID : VN7CZA2SZB5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.07
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TWY5
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TYM0
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2V099
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input checked="" type="checkbox"/> Senate	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V1Z3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		357210.83	

Full Name (Last, First, Middle Initial) of Payee Felicia Smith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TXF0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Felicia Smith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZ54
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Felicia Smith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V0V1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Felicia Smith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V2G8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brenda Smith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2033 W 104th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3530	Transaction ID : VN7CZA2SPA6
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Brenda Smith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2033 W 104th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3530	Transaction ID : VN7CZA2SQV3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brenda Smith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2033 W 104th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3530	Transaction ID : VN7CZA2SSC8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brenda Smith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2033 W 104th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3530	Transaction ID : VN7CZA2STX5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TX84
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TY9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2V0M6
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input checked="" type="checkbox"/> Senate	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V292
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mister Sparks		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1091 E 21st Ave		Amount 10.69	
City Columbus	State OH	Zip Code 43211-2409	Transaction ID : VN7CZA2TAA0
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mister Sparks		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1091 E 21st Ave		Amount 10.69	
City Columbus	State OH	Zip Code 43211-2409	Transaction ID : VN7CZA2TBE4
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	55.58
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Mister Sparks		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1091 E 21st Ave		Amount 10.69	
City Columbus	State OH	Zip Code 43211-2409	Transaction ID : VN7CZA2TCJ7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mister Sparks		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1091 E 21st Ave		Amount 10.69	
City Columbus	State OH	Zip Code 43211-2409	Transaction ID : VN7CZA2TDP1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1626 W 5th Ave		Amount 3.33	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA2TDW9
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	24.71
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1626 W 5th Ave		Amount 6.00	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA2TDX6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1626 W 5th Ave		Amount 5.00	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA2TDY4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1626 W 5th Ave		Amount 3.33	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA2TE42
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	14.33
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1626 W 5th Ave		Amount 6.00	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald 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) _____	
		2016 501553.03	

Transaction ID : VN7CZA2TE50

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1626 W 5th Ave		Amount 5.00	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald 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) _____	
		2016 501553.03	

Transaction ID : VN7CZA2TE68

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1626 W 5th Ave		Amount 3.33	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		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) _____	
		2016 357210.83	

Transaction ID : VN7CZA2TEC5

(a) SUBTOTAL of Itemized Independent Expenditures.....	14.33
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1626 W 5th Ave		Amount 6.00	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA2TED3
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1626 W 5th Ave		Amount 5.00	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA2TEE1
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1626 W 5th Ave		Amount 3.33	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA2TEN6
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	14.33
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1626 W 5th Ave		Amount 6.00	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA2TEP4
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1626 W 5th Ave		Amount 5.00	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA2TEQ2
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marcus Spencer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7241 Ogontz Ave		Amount 34.20	
City Philadelphia	State PA	Zip Code 19138-1303	Transaction ID : VN7CZA2SWS7
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	45.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Marcus Spencer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7241 Ogontz Ave		Amount 34.20	
City Philadelphia	State PA	Zip Code 19138-1303	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SXJ5

Full Name (Last, First, Middle Initial) of Payee Marcus Spencer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7241 Ogontz Ave		Amount 34.20	
City Philadelphia	State PA	Zip Code 19138-1303	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SYB2

Full Name (Last, First, Middle Initial) of Payee Marcus Spencer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 7241 Ogontz Ave		Amount 34.20	
City Philadelphia	State PA	Zip Code 19138-1303	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SZ40

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kristy Steele		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1404 Larchmont Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2814	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SNR6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Kristy Steele		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1404 Larchmont Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2814	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SQ91
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Kristy Steele		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1404 Larchmont Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2814	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SRT8
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input checked="" type="checkbox"/> Senate	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Kristy Steele		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1404 Larchmont Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2814	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Katie Suggs		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1962 Spring St		Amount 27.93	
City Winter Park	State FL	Zip Code 32792-1721	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Katie Suggs		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1962 Spring St		Amount 27.93	
City Winter Park	State FL	Zip Code 32792-1721	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	90.06
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee John Sweeney		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2528 Jay Ave # C		Amount 34.20	
City Cleveland	State OH	Zip Code 44113-3072	Transaction ID : VN7CZA2SN71
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Sweeney		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2528 Jay Ave # C		Amount 34.20	
City Cleveland	State OH	Zip Code 44113-3072	Transaction ID : VN7CZA2SPR7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Sweeney		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2528 Jay Ave # C		Amount 34.20	
City Cleveland	State OH	Zip Code 44113-3072	Transaction ID : VN7CZA2SR94
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee John Sweeney		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2528 Jay Ave # C		Amount 34.20	
City Cleveland	State OH	Zip Code 44113-3072	Transaction ID : VN7CZA2SST9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		357210.83	

Full Name (Last, First, Middle Initial) of Payee Fourera Tahirou		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TY46
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

Full Name (Last, First, Middle Initial) of Payee Fourera Tahirou		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZS2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	55.58
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Fourera Tahirou		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Fourera Tahirou		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Telian		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1776	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	55.58
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Michael Telian		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1776	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T5R9

Full Name (Last, First, Middle Initial) of Payee Michael Telian		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1776	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T6P6

Full Name (Last, First, Middle Initial) of Payee Michael Telian		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1776	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2T7K5

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Helena Thesing		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 109 Keith Ct		Amount 34.20	
City Winter Springs	State FL	Zip Code 32708-2479	Transaction ID : VN7CZA2V5C2
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Helena Thesing		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 109 Keith Ct		Amount 34.20	
City Winter Springs	State FL	Zip Code 32708-2479	Transaction ID : VN7CZA2V6H5
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tatiyana Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TY12
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tatiyana Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TZP9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Tatiyana Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2V1C5
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		357210.83	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Tatiyana Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2V312
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		357210.83	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1701 Sterling Rd		Amount 22.80	
City Park Forest	State IL	Zip Code 60466	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TF68
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1701 Sterling Rd		Amount 22.80	
City Park Forest	State IL	Zip Code 60466	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TG45
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1701 Sterling Rd		Amount 22.80	
City Park Forest	State IL	Zip Code 60466	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TJY3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1701 Sterling Rd		Amount 22.80	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA2TKW0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA2TS28
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA2TSN8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.14
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TVF6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TW24
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Rodney Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 302 W Nedro Ave		Amount 10.69	
City Philadelphia	State PA	Zip Code 19120-1833	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SWY7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	19.03
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Rodney Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 302 W Nedro Ave		Amount 10.69	
City Philadelphia	State PA	Zip Code 19120-1833	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SXQ4

Full Name (Last, First, Middle Initial) of Payee Rodney Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 302 W Nedro Ave		Amount 10.69	
City Philadelphia	State PA	Zip Code 19120-1833	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SYG2

Full Name (Last, First, Middle Initial) of Payee Rodney Thomas		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 302 W Nedro Ave		Amount 10.69	
City Philadelphia	State PA	Zip Code 19120-1833	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SZ99

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.07
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jarrett Thompson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2352 Woodcrest Dr		Amount 47.06	
City Winter Park	State FL	Zip Code 32792-5421	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jarrett Thompson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2352 Woodcrest Dr		Amount 47.06	
City Winter Park	State FL	Zip Code 32792-5421	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	128.32
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TYN8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V0A7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V201
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3250 Rider Trl S		Amount 30.78	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T0E0
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3250 Rider Trl S		Amount 30.78	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T0K9
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3250 Rider Trl S		Amount 30.78	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T128
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	92.34
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3250 Rider Trl S		Amount 30.78	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA2T177
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3250 Rider Trl S		Amount 7.50	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA2T1X1
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3250 Rider Trl S		Amount 7.50	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA2T1Z7
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	45.78
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3250 Rider Trl S		Amount 7.50	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input 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)	

Transaction ID : VN7CZA2T254

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3250 Rider Trl S		Amount 7.50	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald 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)	

Transaction ID : VN7CZA2T270

Full Name (Last, First, Middle Initial) of Payee Ali Totten		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2091 Creekview Ct Apt C		Amount 34.20	
City Reynoldsburg	State OH	Zip Code 43068-4253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input 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)	

Transaction ID : VN7CZA2T9K8

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Ali Totten		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2091 Creekview Ct Apt C		Amount 34.20	
City Reynoldsburg	State OH	Zip Code 43068-4253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TAR1

Full Name (Last, First, Middle Initial) of Payee Ali Totten		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2091 Creekview Ct Apt C		Amount 34.20	
City Reynoldsburg	State OH	Zip Code 43068-4253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TBW3

Full Name (Last, First, Middle Initial) of Payee Ali Totten		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 2091 Creekview Ct Apt C		Amount 34.20	
City Reynoldsburg	State OH	Zip Code 43068-4253	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TD07

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TX01
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TYP6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V0B4
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V219
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Courtney Troup		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4106 Howley St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1419	Transaction ID : VN7CZA2T4H2
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Courtney Troup		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4106 Howley St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1419	Transaction ID : VN7CZA2T5G7
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Courtney Troup		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4106 Howley St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T6E2
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		97855.02	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Courtney Troup		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4106 Howley St		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15224-1419	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T7B1
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought		97855.02	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Andre Tucker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4294 Brooklands Dr		Amount 34.20	
City Hilliard	State OH	Zip Code 43026-1916	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T9X7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Andre Tucker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4294 Brooklands Dr		Amount 34.20	
City Hilliard	State OH	Zip Code 43026-1916	Transaction ID : VN7CZA2TB20
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Andre Tucker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4294 Brooklands Dr		Amount 34.20	
City Hilliard	State OH	Zip Code 43026-1916	Transaction ID : VN7CZA2TC62
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Andre Tucker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4294 Brooklands Dr		Amount 34.20	
City Hilliard	State OH	Zip Code 43026-1916	Transaction ID : VN7CZA2TDA6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Christina Tull		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 91 Kittanning Pike		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15215-1345	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T4V1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Christina Tull		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 91 Kittanning Pike		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15215-1345	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T5T4
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Christina Tull		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 91 Kittanning Pike		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15215-1345	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T6R1
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Christina Tull		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 91 Kittanning Pike		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15215-1345	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Keith Turner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1754 Lee Rd		Amount 34.20	
City Cleveland Hts	State OH	Zip Code 44118-1736	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Keith Turner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1754 Lee Rd		Amount 34.20	
City Cleveland Hts	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA2SPV0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Keith Turner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1754 Lee Rd		Amount 34.20	
City Cleveland Hts	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA2SRC7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Keith Turner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1754 Lee Rd		Amount 34.20	
City Cleveland Hts	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA2SSX2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Robert Ulmer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 726 Marlyn Rd		Amount 34.20	
City Philadelphia	State PA	Zip Code 19151-3825	Transaction ID : VN7CZA2SWV3
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Robert Ulmer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 726 Marlyn Rd		Amount 34.20	
City Philadelphia	State PA	Zip Code 19151-3825	Transaction ID : VN7CZA2SXM1
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Robert Ulmer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 726 Marlyn Rd		Amount 34.20	
City Philadelphia	State PA	Zip Code 19151-3825	Transaction ID : VN7CZA2SYD8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Robert Ulmer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 726 Marlyn Rd		Amount 34.20	
City Philadelphia	State PA	Zip Code 19151-3825	Transaction ID : VN7CZA2SZ66
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 97855.02			

Full Name (Last, First, Middle Initial) of Payee Shuntell Ulmer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA2TXS9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 501553.03			

Full Name (Last, First, Middle Initial) of Payee Shuntell Ulmer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA2TZE5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 501553.03			

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shuntell Ulmer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA2V142
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shuntell Ulmer		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA2V2S9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 22.80	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA2TF35
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 22.80	
City Chicago	State IL	Zip Code 60623-1893	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TG12
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		9506.60	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 22.80	
City Chicago	State IL	Zip Code 60623-1893	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2JV0
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 22.80	
City Chicago	State IL	Zip Code 60623-1893	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TKS7
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.17	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA2TS10
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.17	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA2TSM0
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.17	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA2TVE8
Purpose of Expenditure Per Diem	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 50153.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.17	
City Chicago	State IL	Zip Code 60623-1893	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2TW16

Full Name (Last, First, Middle Initial) of Payee Andy Vazquez		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 829 Glastonbury Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34758-2607	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2V549

Full Name (Last, First, Middle Initial) of Payee Andy Vazquez		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 829 Glastonbury Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34758-2607	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		501553.03	

Transaction ID : VN7CZA2V691

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.57
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Tracy Vazquez		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 829 Glastonbury Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34758-2607	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V515
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Tracy Vazquez		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 829 Glastonbury Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34758-2607	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V668
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Roberto Velazquez		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 108 Puelba Ln		Amount 34.20	
City Kissimmee	State FL	Zip Code 34743-9218	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V4S4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Roberto Velazquez		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 108 Puelba Ln		Amount 34.20	
City Kissimmee	State FL	Zip Code 34743-9218	Transaction ID : VN7CZA2V5Y5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Frank Veney		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 708 Warren St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-2669	Transaction ID : VN7CZA33P72
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Frank Veney		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 708 Warren St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-2669	Transaction ID : VN7CZA33PM5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Frank Veney		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 708 Warren St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-2669	Transaction ID : VN7CZA33QV3
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Frank Veney		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 708 Warren St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-2669	Transaction ID : VN7CZA33R84
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee AnnMarie Viehweger		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4841 Ute St		Amount 34.20	
City Orlando	State FL	Zip Code 32819-8452	Transaction ID : VN7CZA2V4V0
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee AnnMarie Viehweger		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4841 Ute St		Amount 34.20	
City Orlando	State FL	Zip Code 32819-8452	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2V600

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 307 W 6th St		Amount 4.17	
City Royal Oak	State MI	Zip Code 48067-2548	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TRV2

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 307 W 6th St		Amount 4.17	
City Royal Oak	State MI	Zip Code 48067-2548	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2TSE3

(a) SUBTOTAL of Itemized Independent Expenditures.....	42.54
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 307 W 6th St		Amount 4.17	
City Royal Oak	State MI	Zip Code 48067-2548	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TV81
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 307 W 6th St		Amount 4.17	
City Royal Oak	State MI	Zip Code 48067-2548	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TVV9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Damon Walker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1949 Millvale Ct		Amount 34.20	
City Cincinnati	State OH	Zip Code 45225-1210	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TWN4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	42.54
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Damon Walker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1949 Millvale Ct		Amount 34.20	
City Cincinnati	State OH	Zip Code 45225-1210	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Damon Walker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1949 Millvale Ct		Amount 34.20	
City Cincinnati	State OH	Zip Code 45225-1210	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Damon Walker		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1949 Millvale Ct		Amount 34.20	
City Cincinnati	State OH	Zip Code 45225-1210	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Alexander Walsh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 100 McEntee St Apt 2		Amount 34.20	
City Kingston	State NY	Zip Code 12401-5956	Transaction ID : VN7CZA2SWJ2
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Alexander Walsh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 100 McEntee St Apt 2		Amount 34.20	
City Kingston	State NY	Zip Code 12401-5956	Transaction ID : VN7CZA2SXB9
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Alexander Walsh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 100 McEntee St Apt 2		Amount 34.20	
City Kingston	State NY	Zip Code 12401-5956	Transaction ID : VN7CZA2SY47
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Alexander Walsh		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 100 McEntee St Apt 2		Amount 34.20	
City Kingston	State NY	Zip Code 12401-5956	Transaction ID : VN7CZA2SYX4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Domonique Walters		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1710 W 16th St		Amount 34.20	
City Sanford	State FL	Zip Code 32771-3107	Transaction ID : VN7CZA2V5M6
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Domonique Walters		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1710 W 16th St		Amount 34.20	
City Sanford	State FL	Zip Code 32771-3107	Transaction ID : VN7CZA2V6S8
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Chris Walton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TXK1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Chris Walton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2TZ88
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Chris Walton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2V0Y5
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Chris Walton		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2V2K1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Aprillynn Wamsley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TY20
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Aprillynn Wamsley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA2TZQ6
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	55.58
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Aprillynn Wamsley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2V1D3

Full Name (Last, First, Middle Initial) of Payee Aprillynn Wamsley		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 10.69	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA2V320

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 28.89	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA33P15

(a) SUBTOTAL of Itemized Independent Expenditures.....	50.27
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 28.89	
City Saint Louis	State MO	Zip Code 63115-2031	Transaction ID : VN7CZA33PE8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 28.89	
City Saint Louis	State MO	Zip Code 63115-2031	Transaction ID : VN7CZA33QN6
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 28.89	
City Saint Louis	State MO	Zip Code 63115-2031	Transaction ID : VN7CZA33R26
Purpose of Expenditure Salary and Benefits	Category/ Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	86.67
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA33SN9

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA33SR3

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA33T14

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA33T48

Full Name (Last, First, Middle Initial) of Payee Chaneisha Weaver		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 15717 Halliday Ave # UP		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-3240	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SNX5

Full Name (Last, First, Middle Initial) of Payee Chaneisha Weaver		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 15717 Halliday Ave # UP		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-3240	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SQE0

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.57
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Chaneisha Weaver		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 15717 Halliday Ave # UP		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-3240	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chaneisha Weaver		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 15717 Halliday Ave # UP		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-3240	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Suphie Wesner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3006 Woodbury Rd		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-2441	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Suphie Wesner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3006 Woodbury Rd		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-2441	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SQM8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Suphie Wesner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3006 Woodbury Rd		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-2441	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SS53
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Suphie Wesner		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 3006 Woodbury Rd		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-2441	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2STP0
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 357210.83		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 335 Crawford Rd		Amount 22.80	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA2TF76
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 9506.60			

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 335 Crawford Rd		Amount 22.80	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA2TG53
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 9506.60			

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 335 Crawford Rd		Amount 22.80	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA2TJZ1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 501553.03			

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 335 Crawford Rd		Amount 22.80	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA2TKX8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 335 Crawford Rd		Amount 4.17	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA2TS44
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 335 Crawford Rd		Amount 4.17	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA2TSQ4
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.14
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 335 Crawford Rd		Amount 4.17	
City Saint Louis	State MO	Zip Code 63137-3906	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TVH0
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 335 Crawford Rd		Amount 4.17	
City Saint Louis	State MO	Zip Code 63137-3906	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA2TW40
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Yuki Wiland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5435 Donner Dr		Amount 34.20	
City Akron	State OH	Zip Code 44333	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2SNH0
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	42.54
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Yuki Wiland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5435 Donner Dr		Amount 34.20	
City Akron	State OH	Zip Code 44333	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SQ26
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		501553.03	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Yuki Wiland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5435 Donner Dr		Amount 34.20	
City Akron	State OH	Zip Code 44333	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SRK3
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		357210.83	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Yuki Wiland		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 5435 Donner Dr		Amount 34.20	
City Akron	State OH	Zip Code 44333	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2ST48
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		357210.83	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Gary Wilson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1972 Stratford Way		Amount 34.20	
City Columbus	State OH	Zip Code 43219-2974	Transaction ID : VN7CZA2TA01
Purpose of Expenditure Salary and Benefits	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gary Wilson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1972 Stratford Way		Amount 34.20	
City Columbus	State OH	Zip Code 43219-2974	Transaction ID : VN7CZA2TB53
Purpose of Expenditure Salary and Benefits	Category/Type	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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gary Wilson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1972 Stratford Way		Amount 34.20	
City Columbus	State OH	Zip Code 43219-2974	Transaction ID : VN7CZA2TC96
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Gary Wilson		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1972 Stratford Way		Amount 34.20	
City Columbus	State OH	Zip Code 43219-2974	Transaction ID : VN7CZA2TDD0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 357210.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 27.25	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA2SZG3
Purpose of Expenditure Lodging	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 27.25	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA2SZH0
Purpose of Expenditure Lodging	Category/Type	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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	88.70
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 27.25	
City Philadelphia	State PA	Zip Code 19103-2735	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SZP0

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 27.25	
City Philadelphia	State PA	Zip Code 19103-2735	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SZQ8

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 27.25	
City Philadelphia	State PA	Zip Code 19103-2735	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA2SZW7

(a) SUBTOTAL of Itemized Independent Expenditures.....	81.75
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 27.25	
City Philadelphia	State PA	Zip Code 19103-2735	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		97855.02	

Transaction ID : VN7CZA2SZX5

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 27.25	
City Philadelphia	State PA	Zip Code 19103-2735	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		97855.02	

Transaction ID : VN7CZA2T025

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 27.25	
City Philadelphia	State PA	Zip Code 19103-2735	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		97855.02	

Transaction ID : VN7CZA2T033

(a) SUBTOTAL of Itemized Independent Expenditures.....	81.75
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Paul Woodlyn, Jr.		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6066 Regent St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19142-1436	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SWG6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Paul Woodlyn, Jr.		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6066 Regent St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19142-1436	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SX94
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Paul Woodlyn, Jr.		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6066 Regent St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19142-1436	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2SY21
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Paul Woodlyn, Jr.		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6066 Regent St		Amount 34.20	
City Philadelphia	State PA	Zip Code 19142-1436	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Margarita Wooten		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6147 S Carpenter St		Amount 22.80	
City Chicago	State IL	Zip Code 60621-1415	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Margarita Wooten		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6147 S Carpenter St		Amount 22.80	
City Chicago	State IL	Zip Code 60621-1415	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Margarita Wooten		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6147 S Carpenter St		Amount 22.80	
City Chicago	State IL	Zip Code 60621-1415	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TJX5
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Margarita Wooten		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6147 S Carpenter St		Amount 22.80	
City Chicago	State IL	Zip Code 60621-1415	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA2TKV2
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Margarita Wooten		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6147 S Carpenter St		Amount 4.17	
City Chicago	State IL	Zip Code 60621-1415	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA2TRZ4
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 9506.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.77
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Margarita Wooten		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6147 S Carpenter St		Amount 4.17	
City Chicago	State IL	Zip Code 60621-1415	Transaction ID : VN7CZA2TSJ4
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9506.60		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Margarita Wooten		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6147 S Carpenter St		Amount 4.17	
City Chicago	State IL	Zip Code 60621-1415	Transaction ID : VN7CZA2TVC2
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Margarita Wooten		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 6147 S Carpenter St		Amount 4.17	
City Chicago	State IL	Zip Code 60621-1415	Transaction ID : VN7CZA2TVZ0
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 501553.03		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jennifer Zokaite		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15229-1825	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T4A7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jennifer Zokaite		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15229-1825	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T592
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 501553.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jennifer Zokaite		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15229-1825	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA2T677
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Toomey		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 97855.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(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)
Working America

Full Name (Last, First, Middle Initial) of Payee Jennifer Zokaite		Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 34.20	
City Pittsburgh	State PA	Zip Code 15229-1825	Transaction ID : VN7CZA2T746
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97855.02		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:		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:		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)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	34.20
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	40133.12