

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..... 0.00
7. TOTAL INDEPENDENT EXPENDITURES 90683.05

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
Cobb, James, , Mr., Jr.	<i>Cobb, James, , Mr., Jr.</i> [Electronically Filed]	10/29/2016

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Abdul-Haqq, Morocco, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 24.77	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA6QGQ0
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: Burr, Richard, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Abdul-Haqq, Morocco, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 24.77	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA6QJ04
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: Ross, Deborah, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Abdul-Haqq, Morocco, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 24.77	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA6QNV1
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: Clinton, Hillary, , ,		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		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.31
(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 Abdul-Haqq, Morocco, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 24.77	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA6QQ45
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Abraham, Samuel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5543 Minaret Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32821-8120	Transaction ID : VN7CZA6P446
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Abraham, Samuel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5543 Minaret Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32821-8120	Transaction ID : VN7CZA6P5K7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	93.17
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Abraham, Samuel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5543 Minaret Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32821-8120	Transaction ID : VN7CZA6P675
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Abraham, Samuel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5543 Minaret Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32821-8120	Transaction ID : VN7CZA6P6T4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Acosta, Pedro, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3827 N Franklin St		Amount 17.10	
City Philadelphia	State PA	Zip Code 19140-3228	Transaction ID : VN7CZA6QHE2
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	85.50
(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 Acosta, Pedro, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3827 N Franklin St		Amount 17.10	
City Philadelphia	State PA	Zip Code 19140-3228	Transaction ID : VN7CZA6QJQ3
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: Ross, Deborah, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Acosta, Pedro, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3827 N Franklin St		Amount 17.10	
City Philadelphia	State PA	Zip Code 19140-3228	Transaction ID : VN7CZA6QPJ3
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: Clinton, Hillary, , ,		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 1672274.44			

Full Name (Last, First, Middle Initial) of Payee Acosta, Pedro, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3827 N Franklin St		Amount 17.10	
City Philadelphia	State PA	Zip Code 19140-3228	Transaction ID : VN7CZA6QQV7
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: Trump, Donald, , ,		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 1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Acosta, Pedro, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3827 N Franklin St		Amount 3.13	
City Philadelphia	State PA	Zip Code 19140-3228	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA6QWC8
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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		236458.09	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 Acosta, Pedro, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3827 N Franklin St		Amount 3.13	
City Philadelphia	State PA	Zip Code 19140-3228	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA6QWN9
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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		236458.09	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 Acosta, Pedro, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3827 N Franklin St		Amount 3.13	
City Philadelphia	State PA	Zip Code 19140-3228	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA6QXG3
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		1672274.44	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.....	9.39
(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 Acosta, Pedro, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3827 N Franklin St		Amount 3.13	
City Philadelphia	State PA	Zip Code 19140-3228	Transaction ID : VN7CZA6QXS4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Adams, Derrick, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3245 Pennsylvania Ave		Amount 68.40	
City Saint Louis	State MO	Zip Code 63118-2912	Transaction ID : VN7CZA6RAD7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Adams, Stefan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2746 Atwood Ter		Amount 48.09	
City Columbus	State OH	Zip Code 43211-1108	Transaction ID : VN7CZA6NJ72
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	119.62
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Adams, Stefan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2746 Atwood Ter		Amount 48.09	
City Columbus	State OH	Zip Code 43211-1108	Transaction ID : VN7CZA6NKKW8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Adams, Stefan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2746 Atwood Ter		Amount 48.09	
City Columbus	State OH	Zip Code 43211-1108	Transaction ID : VN7CZA6NNH7
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Adams, Stefan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2746 Atwood Ter		Amount 48.09	
City Columbus	State OH	Zip Code 43211-1108	Transaction ID : VN7CZA6NQ64
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	144.27
(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 Adekanle, Aderonke, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 90 Pine St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6QYD2
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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 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 Adekanle, Aderonke, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 90 Pine St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6QZN6
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 Adekanle, Aderonke, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 90 Pine St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6R3D2
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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.....	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 Adekanle, Aderonke, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 90 Pine St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401	Transaction ID : VN7CZA6R4N8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ahmad, Shonen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6804 Clearhurst Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43229-7077	Transaction ID : VN7CZA6NKH4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ahmad, Shonen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6804 Clearhurst Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43229-7077	Transaction ID : VN7CZA6NN60
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Ahmad, Shonen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6804 Clearhurst Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43229-7077	Transaction ID : VN7CZA6NPV7
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ahmad, Shonen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6804 Clearhurst Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43229-7077	Transaction ID : VN7CZA6NRG5
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Al-Shadadi, Hanan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 23551 Center Ridge Rd		Amount 34.20	
City Westlake	State OH	Zip Code 44145-3642	Transaction ID : VN7CZA6PA73
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Al-Shadadi, Hanan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 23551 Center Ridge Rd		Amount 34.20	
City Westlake	State OH	Zip Code 44145-3642	Transaction ID : VN7CZA6PD61
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Al-Shadadi, Hanan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 23551 Center Ridge Rd		Amount 34.20	
City Westlake	State OH	Zip Code 44145-3642	Transaction ID : VN7CZA6PG50
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Al-Shadadi, Hanan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 23551 Center Ridge Rd		Amount 34.20	
City Westlake	State OH	Zip Code 44145-3642	Transaction ID : VN7CZA6PK47
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Ali, Abdirahman, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3402 Calimero Dr Unit C		Amount 34.20	
City Columbus	State OH	Zip Code 43224-2887	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NKA9

Full Name (Last, First, Middle Initial) of Payee Ali, Abdirahman, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3402 Calimero Dr Unit C		Amount 34.20	
City Columbus	State OH	Zip Code 43224-2887	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NMZ5

Full Name (Last, First, Middle Initial) of Payee Ali, Abdirahman, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3402 Calimero Dr Unit C		Amount 34.20	
City Columbus	State OH	Zip Code 43224-2887	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NPM3

(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 Ali, Abdirahman, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3402 Calimero Dr Unit C		Amount 34.20	
City Columbus	State OH	Zip Code 43224-2887	Transaction ID : VN7CZA6NR90
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Allen, William, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3431 1st Ave		Amount 49.53	
City Urbancrest	State OH	Zip Code 43123-1311	Transaction ID : VN7CZA6NK00
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Allen, William, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3431 1st Ave		Amount 49.53	
City Urbancrest	State OH	Zip Code 43123-1311	Transaction ID : VN7CZA6NMN6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	133.26
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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, William, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3431 1st Ave		Amount 49.53	
City Urbancrest	State OH	Zip Code 43123-1311	Transaction ID : VN7CZA6NPA4
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: Portman, Rob, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		897326.39	

Full Name (Last, First, Middle Initial) of Payee Allen, William, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3431 1st Ave		Amount 49.53	
City Urbancrest	State OH	Zip Code 43123-1311	Transaction ID : VN7CZA6NQZ1
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: Strickland, Ted, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		897326.39	

Full Name (Last, First, Middle Initial) of Payee Alloy, Noah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 973 Mount Vernon Ave Apt A		Amount 49.53	
City Columbus	State OH	Zip Code 43203-1573	Transaction ID : VN7CZA6NJA6
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: Clinton, Hillary, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	148.59
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Alloy, Noah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 973 Mount Vernon Ave Apt A		Amount 49.53	
City Columbus	State OH	Zip Code 43203-1573	Transaction ID : VN7CZA6NKZ2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Alloy, Noah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 973 Mount Vernon Ave Apt A		Amount 49.53	
City Columbus	State OH	Zip Code 43203-1573	Transaction ID : VN7CZA6NNM1
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Alloy, Noah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 973 Mount Vernon Ave Apt A		Amount 49.53	
City Columbus	State OH	Zip Code 43203-1573	Transaction ID : VN7CZA6NQ97
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	148.59
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Anders, Ryan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1954 Amato Dr		Amount 68.40	
City North Versailles	State PA	Zip Code 15137-2735	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NWA7
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 Anders, Ryan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1954 Amato Dr		Amount 68.40	
City North Versailles	State PA	Zip Code 15137-2735	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NXF7
Name of Federal Candidate Supported or Opposed by Expenditure: McGinty, Kathleen, , ,		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	

Full Name (Last, First, Middle Initial) of Payee Anderson, David, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1229 Meyer St		Amount 68.40	
City Saint Louis	State MO	Zip Code 63130-1828	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6RCD1
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO 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.....	205.20
(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 Anderson, Lydell, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 140 Connolly Dr		Amount 91.91	
City Saint Louis	State MO	Zip Code 63135-1021	Transaction ID : VN7CZA6RBH0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Anderson, Shane, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 12.50	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA6RJN6
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Anderson-Lane, Alexis, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5637 Terry Ave		Amount 91.91	
City Saint Louis	State MO	Zip Code 63120-1019	Transaction ID : VN7CZA6RB47
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	196.32
(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 Angela Oliver		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 47515 S Vincennes Ave Apt 2		Amount 91.91	
City Chicago	State IL	Zip Code 60643	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NT94
Name of Federal Candidate Supported or Opposed by Expenditure: Kirk, Mark, , ,		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		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	
102711.83			

Full Name (Last, First, Middle Initial) of Payee Angela Oliver		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 47515 S Vincennes Ave Apt 2		Amount 91.91	
City Chicago	State IL	Zip Code 60643	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NV13
Name of Federal Candidate Supported or Opposed by Expenditure: Duckworth, Tammy, , ,		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		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	
102711.83			

Full Name (Last, First, Middle Initial) of Payee Arnold, Jason, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 519 W King St Apt B22		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-4636	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NZB1
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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	
1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	252.22
(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 Arnold, Jason, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 519 W King St Apt B22		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-4636	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Arveda, Abraham, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1501 NW 56th St		Amount 89.16	
City Seattle	State WA	Zip Code 98107-5272	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Arveda, Abraham, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1501 NW 56th St		Amount 12.50	
City Seattle	State WA	Zip Code 98107-5272	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	170.06
(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 Ashanti Henry		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5650 N Kimball Ave		Amount 76.95	
City Chicago	State IL	Zip Code 60659-4502	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NTR2
Name of Federal Candidate Supported or Opposed by Expenditure: Kirk, Mark, , ,		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		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	
102711.83			

Full Name (Last, First, Middle Initial) of Payee Ashanti Henry		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5650 N Kimball Ave		Amount 76.95	
City Chicago	State IL	Zip Code 60659-4502	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NVG2
Name of Federal Candidate Supported or Opposed by Expenditure: Duckworth, Tammy, , ,		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		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	
102711.83			

Full Name (Last, First, Middle Initial) of Payee Askew, Tan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 559 E 120th St		Amount 27.93	
City Cleveland	State OH	Zip Code 44108-1845	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PBN6
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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	
1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	181.83
(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 Askew, Tan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 559 E 120th St		Amount 27.93	
City Cleveland	State OH	Zip Code 44108-1845	Transaction ID : VN7CZA6PEM5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Askew, Tan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 559 E 120th St		Amount 27.93	
City Cleveland	State OH	Zip Code 44108-1845	Transaction ID : VN7CZA6PHK3
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Askew, Tan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 559 E 120th St		Amount 27.93	
City Cleveland	State OH	Zip Code 44108-1845	Transaction ID : VN7CZA6PMJ1
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(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 Avis Rent-A-Car - Cincinnati Downtown		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 14.08	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6PY18
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Avis Rent-A-Car - Cincinnati Downtown		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6PY26
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Avis Rent-A-Car - Cincinnati Downtown		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 14.08	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6PYE1
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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.....	40.21
(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 Avis Rent-A-Car - Cincinnati Downtown		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6PYF9
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Avis Rent-A-Car - Cincinnati Downtown		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 14.08	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6PYV4
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Avis Rent-A-Car - Cincinnati Downtown		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6PYW2
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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.....	▶	38.18
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Avis Rent-A-Car - Cincinnati Downtown		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 14.08	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6PZ86
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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		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 Avis Rent-A-Car - Cincinnati Downtown		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6PZ94
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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		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 Avril, Hans, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5723 Kingsgate Dr Apt C		Amount 68.40	
City Orlando	State FL	Zip Code 32839-4203	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6P3T7
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought		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.....	94.53
(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 Avril, Hans, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5723 Kingsgate Dr Apt C		Amount 68.40	
City Orlando	State FL	Zip Code 32839-4203	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Badaraco, Carlos, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 24.77	
City Orlando	State FL	Zip Code 32835-7062	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Badaraco, Carlos, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 24.77	
City Orlando	State FL	Zip Code 32835-7062	
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	117.94
(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 Badaraco, Carlos, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 24.77	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA6Q555
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Badaraco, Carlos, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 24.77	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA6Q656
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Badaraco, Carlos, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 3.13	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA6QC67
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	52.67
(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 Badaraco, Carlos, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 3.13	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA6QCM8
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Badaraco, Carlos, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 3.13	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA6QDY9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Badaraco, Carlos, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 3.13	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA6QEC0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.39
(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 Baldwin, Randall, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2806 Pleasant Garden Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4700	Transaction ID : VN7CZA6QZ00
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Baldwin, Randall, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2806 Pleasant Garden Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4700	Transaction ID : VN7CZA6R086
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Baldwin, Randall, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2806 Pleasant Garden Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4700	Transaction ID : VN7CZA6R402
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Baldwin, Randall, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2806 Pleasant Garden Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4700	Transaction ID : VN7CZA6R586
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Balliet, Daryl, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5233 Brownfield Ct		Amount 34.20	
City Columbus	State OH	Zip Code 43232-4607	Transaction ID : VN7CZA6NK59
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Balliet, Daryl, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5233 Brownfield Ct		Amount 34.20	
City Columbus	State OH	Zip Code 43232-4607	Transaction ID : VN7CZA6NMT5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Balliet, Daryl, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5233 Brownfield Ct		Amount 34.20	
City Columbus	State OH	Zip Code 43232-4607	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NPF4
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Balliet, Daryl, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5233 Brownfield Ct		Amount 34.20	
City Columbus	State OH	Zip Code 43232-4607	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NR41
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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 897326.39		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 Bardo, Milan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4310 W 52nd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44144-2904	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PB26
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Bardo, Milan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4310 W 52nd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44144-2904	Transaction ID : VN7CZA6PE14
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Bardo, Milan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4310 W 52nd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44144-2904	Transaction ID : VN7CZA6PH03
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Bardo, Milan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4310 W 52nd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44144-2904	Transaction ID : VN7CZA6PKZ0
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Battle, Barbara, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7325 Beacon Hill Loop Apt 5		Amount 34.20	
City Orlando	State FL	Zip Code 32818-6426	Transaction ID : VN7CZA6P2T6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Battle, Barbara, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7325 Beacon Hill Loop Apt 5		Amount 34.20	
City Orlando	State FL	Zip Code 32818-6426	Transaction ID : VN7CZA6P496
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Battle, Barbara, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7325 Beacon Hill Loop Apt 5		Amount 34.20	
City Orlando	State FL	Zip Code 32818-6426	Transaction ID : VN7CZA6P5R7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Battle, Barbara, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7325 Beacon Hill Loop Apt 5		Amount 34.20	
City Orlando	State FL	Zip Code 32818-6426	Transaction ID : VN7CZA6P6B7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Baybo-Jones, Marlana, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 920 Eastgate Ave Apt 2S		Amount 91.91	
City Saint Louis	State MO	Zip Code 63130-3342	Transaction ID : VN7CZA6RAF3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Bayoumi, Omar, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2009 Piney Plains Rd		Amount 17.10	
City Cary	State NC	Zip Code 27518-6861	Transaction ID : VN7CZA6Q1F5
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	143.21
(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 Bayoumi, Omar, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2009 Piney Plains Rd		Amount 17.10	
City Cary	State NC	Zip Code 27518-6861	Transaction ID : VN7CZA6Q2F8
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bayoumi, Omar, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2009 Piney Plains Rd		Amount 17.10	
City Cary	State NC	Zip Code 27518-6861	Transaction ID : VN7CZA6Q5F4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bayoumi, Omar, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2009 Piney Plains Rd		Amount 17.10	
City Cary	State NC	Zip Code 27518-6861	Transaction ID : VN7CZA6Q6F5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Beale, Zoe, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5539 Baynton St # 5547		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-2208	Transaction ID : VN7CZA6NYW3
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Beale, Zoe, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5539 Baynton St # 5547		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-2208	Transaction ID : VN7CZA6P0G2
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: McGinty, Kathleen, , ,		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		368876.35	

Full Name (Last, First, Middle Initial) of Payee Begin, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12050 Lake Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1892	Transaction ID : VN7CZA6P9E7
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: Clinton, Hillary, , ,		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		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Begin, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12050 Lake Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1892	Transaction ID : VN7CZA6PCD6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Begin, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12050 Lake Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1892	Transaction ID : VN7CZA6PFC4
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Begin, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12050 Lake Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1892	Transaction ID : VN7CZA6PJB3
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Begovic, Mirsada, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 201 Holmes Pl Apt 9		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15213-4554	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NWQ0
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Begovic, Mirsada, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 201 Holmes Pl Apt 9		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15213-4554	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NXW0
Name of Federal Candidate Supported or Opposed by Expenditure: McGinty, Kathleen, , ,		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 368876.35		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 Belew, James, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PRH2
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	182.76
(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 Belew, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PT35
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: Trump, Donald, , ,		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	
1672274.44			

Full Name (Last, First, Middle Initial) of Payee Belew, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PVN0
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: Portman, Rob, , ,		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	
897326.39			

Full Name (Last, First, Middle Initial) of Payee Belew, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PX73
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: Strickland, Ted, , ,		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) _____	
		2016	
897326.39			

(a) SUBTOTAL of Itemized Independent Expenditures.....	137.88
(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 Bell, Mejalia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1208 Orchard St Apt A		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-2687	Transaction ID : VN7CZA6QYT2
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bell, Mejalia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1208 Orchard St Apt A		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-2687	Transaction ID : VN7CZA6R028
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bell, Mejalia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1208 Orchard St Apt A		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-2687	Transaction ID : VN7CZA6R3T4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Bell, Mejalia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1208 Orchard St Apt A		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-2687	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6R528
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Belles, David, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 323 S Fairmount St Fl 1		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15232-1003	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NWX7
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Belles, David, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 323 S Fairmount St Fl 1		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15232-1003	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NY28
Name of Federal Candidate Supported or Opposed by Expenditure: McGinty, Kathleen, , ,		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 368876.35		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.....	159.60
(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 Berat, Genesson, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 906 Fenmdell Rd		Amount 68.40	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA6P2X0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Berat, Genesson, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 906 Fenmdell Rd		Amount 68.40	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA6P4C9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Berry, Carlos, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1323 E 115th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44106-1346	Transaction ID : VN7CZA6PB68
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Berry, Carlos, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1323 E 115th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44106-1346	Transaction ID : VN7CZA6PE56
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Berry, Carlos, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1323 E 115th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44106-1346	Transaction ID : VN7CZA6PH45
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Berry, Carlos, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1323 E 115th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44106-1346	Transaction ID : VN7CZA6PM32
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Berry, Mathew, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 210 Cedar St Lot 44		Amount 34.20	
City Pataskala	State OH	Zip Code 43062-8252	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NJJQ9
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Berry, Mathew, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 210 Cedar St Lot 44		Amount 34.20	
City Pataskala	State OH	Zip Code 43062-8252	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NMC5
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Berry, Mathew, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 210 Cedar St Lot 44		Amount 34.20	
City Pataskala	State OH	Zip Code 43062-8252	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NP13
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Berry, Mathew, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 210 Cedar St Lot 44		Amount 34.20	
City Pataskala	State OH	Zip Code 43062-8252	Transaction ID : VN7CZA6NQP0
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <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 10 / 28 / 2016	
Mailing Address 1617 N Lorel Ave		Amount 89.78	
City Chicago	State IL	Zip Code 60639-4313	Transaction ID : VN7CZA6NTK3
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: Kirk, Mark, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Billy Lott		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1617 N Lorel Ave		Amount 89.78	
City Chicago	State IL	Zip Code 60639-4313	Transaction ID : VN7CZA6NVB2
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: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	213.76
(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 Bingaman, Karen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 486 Waggoner Rd		Amount 49.53	
City Reynoldsburg	State OH	Zip Code 43068-9707	Transaction ID : VN7CZA6NJ80
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Bingaman, Karen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 486 Waggoner Rd		Amount 49.53	
City Reynoldsburg	State OH	Zip Code 43068-9707	Transaction ID : VN7CZA6NKX6
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: Trump, Donald, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Bingaman, Karen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 486 Waggoner Rd		Amount 49.53	
City Reynoldsburg	State OH	Zip Code 43068-9707	Transaction ID : VN7CZA6NNJ5
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: Portman, Rob, , ,		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		897326.39	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	148.59
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Bingaman, Karen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 486 Waggoner Rd		Amount 49.53	
City Reynoldsburg	State OH	Zip Code 43068-9707	Transaction ID : VN7CZA6NQ71
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Black, LaCresha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5959 Theodore Ave Fl 2		Amount 89.16	
City Saint Louis	State MO	Zip Code 63136-4711	Transaction ID : VN7CZA6RA96
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bland, Jawneisha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3399 E 65th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44127-1952	Transaction ID : VN7CZA6P9P8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	172.89
(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 Bland, Jawneisha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3399 E 65th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44127-1952	Transaction ID : VN7CZA6PCN7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Bland, Jawneisha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3399 E 65th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44127-1952	Transaction ID : VN7CZA6PFM7
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Bland, Jawneisha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3399 E 65th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44127-1952	Transaction ID : VN7CZA6PJK6
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Blowe, Malcolm, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2620 Bapaume Ave		Amount 22.80	
City Norfolk	State VA	Zip Code 23509-1702	Transaction ID : VN7CZA6QYJ1
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Blowe, Malcolm, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2620 Bapaume Ave		Amount 22.80	
City Norfolk	State VA	Zip Code 23509-1702	Transaction ID : VN7CZA6QZT5
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Blowe, Malcolm, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2620 Bapaume Ave		Amount 22.80	
City Norfolk	State VA	Zip Code 23509-1702	Transaction ID : VN7CZA6R3J1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Blowe, Malcolm, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2620 Bapaume Ave		Amount 22.80	
City Norfolk	State VA	Zip Code 23509-1702	Transaction ID : VN7CZA6R4T7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Bodison, Elizabeth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 607 Canal St		Amount 5.34	
City Durham	State NC	Zip Code 27701-2503	Transaction ID : VN7CZA6QHR1
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Bodison, Elizabeth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 607 Canal St		Amount 5.34	
City Durham	State NC	Zip Code 27701-2503	Transaction ID : VN7CZA6QK12
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.48
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Bodison, Elizabeth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 607 Canal St		Amount 5.34	
City Durham	State NC	Zip Code 27701-2503	Transaction ID : VN7CZA6QPW2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bodison, Elizabeth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 607 Canal St		Amount 5.34	
City Durham	State NC	Zip Code 27701-2503	Transaction ID : VN7CZA6QR56
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bonner, Mary, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3878 W 36th St Down		Amount 39.63	
City Cleveland	State OH	Zip Code 44109-2716	Transaction ID : VN7CZA6PAH2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	50.31
(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 Bonner, Mary, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3878 W 36th St Down		Amount 39.63	
City Cleveland	State OH	Zip Code 44109-2716	Transaction ID : VN7CZA6PDG0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Bonner, Mary, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3878 W 36th St Down		Amount 39.63	
City Cleveland	State OH	Zip Code 44109-2716	Transaction ID : VN7CZA6PGF9
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Bonner, Mary, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3878 W 36th St Down		Amount 39.63	
City Cleveland	State OH	Zip Code 44109-2716	Transaction ID : VN7CZA6PKE6
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Bonzani, Peter, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 914 Iredell St		Amount 5.34	
City Durham	State NC	Zip Code 27705-4122	Transaction ID : VN7CZA6QH3
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bonzani, Peter, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 914 Iredell St		Amount 5.34	
City Durham	State NC	Zip Code 27705-4122	Transaction ID : VN7CZA6QK04
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bonzani, Peter, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 914 Iredell St		Amount 5.34	
City Durham	State NC	Zip Code 27705-4122	Transaction ID : VN7CZA6QP4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.02
(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 Bonzani, Peter, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 914 Iredell St		Amount 5.34	
City Durham	State NC	Zip Code 27705-4122	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QR48

Full Name (Last, First, Middle Initial) of Payee Bowen, Angela, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1108 Castle Wood Ter		Amount 68.40	
City Casselberry	State FL	Zip Code 32707-3656	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P353

Full Name (Last, First, Middle Initial) of Payee Bowen, Angela, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1108 Castle Wood Ter		Amount 68.40	
City Casselberry	State FL	Zip Code 32707-3656	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P4M3

(a) SUBTOTAL of Itemized Independent Expenditures.....	142.14
(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 Bowman, Terry, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 603A Park Ave		Amount 45.05	
City Greensboro	State NC	Zip Code 27405-7711	Transaction ID : VN7CZA6PAA6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bowman, Terry, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 603A Park Ave		Amount 45.05	
City Greensboro	State NC	Zip Code 27405-7711	Transaction ID : VN7CZA6PD95
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bowman, Terry, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 603A Park Ave		Amount 45.05	
City Greensboro	State NC	Zip Code 27405-7711	Transaction ID : VN7CZA6PG83
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	135.15
(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 Bowman, Terry, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 603A Park Ave		Amount 45.05	
City Greensboro	State NC	Zip Code 27405-7711	Transaction ID : VN7CZA6PK71
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Branstetter, Erica, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 9556 Roslan Pl		Amount 68.40	
City Saint Louis	State MO	Zip Code 63114-2616	Transaction ID : VN7CZA6RCE9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brew, Jr, Lamar, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 10251 Pannell Dr		Amount 68.40	
City Saint Louis	State MO	Zip Code 63136-5657	Transaction ID : VN7CZA6RAV8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	181.85
(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 Brewer, Sandra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 24.77	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA6QHF0
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: Burr, Richard, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Brewer, Sandra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 24.77	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA6QJR1
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: Ross, Deborah, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Brewer, Sandra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 24.77	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA6QPK1
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: Clinton, Hillary, , ,		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		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.31
(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 Brewer, Sandra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 24.77	
City Seattle	State WA	Zip Code 98101-3001	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QQW5
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Brewer, Sandra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 3.13	
City Seattle	State WA	Zip Code 98101-3001	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QWM1
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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 236458.09		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 Brewer, Sandra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 3.13	
City Seattle	State WA	Zip Code 98101-3001	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QWX2
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09		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.....	31.03
(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 Brewer, Sandra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 3.13	
City Seattle	State WA	Zip Code 98101-3001	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QXR6
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Brewer, Sandra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 3.13	
City Seattle	State WA	Zip Code 98101-3001	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QY17
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Britford, Terran, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 40 W Long St		Amount 34.20	
City Columbus	State OH	Zip Code 43215-2817	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NKJ2
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	▶	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 Britford, Terran, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 40 W Long St		Amount 34.20	
City Columbus	State OH	Zip Code 43215-2817	Transaction ID : VN7CZA6NN78
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Britford, Terran, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 40 W Long St		Amount 34.20	
City Columbus	State OH	Zip Code 43215-2817	Transaction ID : VN7CZA6NPW5
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Britford, Terran, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 40 W Long St		Amount 34.20	
City Columbus	State OH	Zip Code 43215-2817	Transaction ID : VN7CZA6NRH3
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Broadnet Teleservices LLC		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 975202		Amount 4029.39	
City Dallas	State TX	Zip Code 75397-5202	Transaction ID : VN7CZA6QY25
Purpose of Expenditure Telecommunications	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Broadnet Teleservices LLC		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 975202		Amount 4029.39	
City Dallas	State TX	Zip Code 75397-5202	Transaction ID : VN7CZA6QY33
Purpose of Expenditure Telecommunications	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brochu, Oliver, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3355 Avalon Rd		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-3407	Transaction ID : VN7CZA6PBQ2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	8092.98
(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 Brochu, Oliver, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3355 Avalon Rd		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-3407	Transaction ID : VN7CZA6PEP0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brochu, Oliver, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3355 Avalon Rd		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-3407	Transaction ID : VN7CZA6PHN9
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brochu, Oliver, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3355 Avalon Rd		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-3407	Transaction ID : VN7CZA6PMM6
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Brock, Haley, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 17.10	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA6Q123
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brock, Haley, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 17.10	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA6Q225
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brock, Haley, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 17.10	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA6Q522
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Brock, Haley, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 17.10	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA6Q623
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brock, Tony, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3020 Allegheny Ave Apt A		Amount 48.09	
City Columbus	State OH	Zip Code 43209-3606	Transaction ID : VN7CZA6NJV0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brock, Tony, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3020 Allegheny Ave Apt A		Amount 48.09	
City Columbus	State OH	Zip Code 43209-3606	Transaction ID : VN7CZA6NMG6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	113.28
(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 Brock, Tony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3020 Allegheny Ave Apt A		Amount 48.09	
City Columbus	State OH	Zip Code 43209-3606	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NP55
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Brock, Tony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3020 Allegheny Ave Apt A		Amount 48.09	
City Columbus	State OH	Zip Code 43209-3606	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NQT2
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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 897326.39		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 Brooks, Donovan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1116 Lady Banks Dr		Amount 17.10	
City Durham	State NC	Zip Code 27703-5221	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QGY6
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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 236458.09		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.....	113.28
(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 Brooks, Donovan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1116 Lady Banks Dr		Amount 17.10	
City Durham	State NC	Zip Code 27703-5221	Transaction ID : VN7CZA6QJ77
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brooks, Donovan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1116 Lady Banks Dr		Amount 17.10	
City Durham	State NC	Zip Code 27703-5221	Transaction ID : VN7CZA6QP26
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brooks, Donovan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1116 Lady Banks Dr		Amount 17.10	
City Durham	State NC	Zip Code 27703-5221	Transaction ID : VN7CZA6QQB0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Brooks, Justin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3853 Lindell Blvd Apt 216		Amount 68.40	
City Saint Louis	State MO	Zip Code 63108-3431	Transaction ID : VN7CZA6RA05
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <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: Kander, Jason, , ,		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 81793.49			

Full Name (Last, First, Middle Initial) of Payee Brown, Brian, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PRX7
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: Clinton, Hillary, , ,		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 1672274.44			

Full Name (Last, First, Middle Initial) of Payee Brown, Brian, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTF0
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: Trump, Donald, , ,		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 1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	162.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Brown, Brian, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brown, Brian, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brown, Cassandra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 835 Prigge Rd		Amount 68.40	
City Saint Louis	State MO	Zip Code 63138-3548	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	162.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Brown, Keith, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 23213 Lawrence Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44128-4969	Transaction ID : VN7CZA6PAB4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brown, Keith, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 23213 Lawrence Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44128-4969	Transaction ID : VN7CZA6PDA3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brown, Keith, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 23213 Lawrence Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44128-4969	Transaction ID : VN7CZA6PG91
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Brown, Keith, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 23213 Lawrence Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44128-4969	Transaction ID : VN7CZA6PK89
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Brown, Shalaya, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2573 Silver Oak Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43232-7737	Transaction ID : VN7CZA6NK42
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Brown, Shalaya, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2573 Silver Oak Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43232-7737	Transaction ID : VN7CZA6NMS7
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: Trump, Donald, , ,		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		1672274.44	

(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 Brown, Shalaya, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2573 Silver Oak Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43232-7737	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NPE6
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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		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)
		897326.39	

Full Name (Last, First, Middle Initial) of Payee Brown, Shalaya, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2573 Silver Oak Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43232-7737	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NR33
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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		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)
		897326.39	

Full Name (Last, First, Middle Initial) of Payee Brown, Theodore, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2937 Hebert St		Amount 68.40	
City Saint Louis	State MO	Zip Code 63107-2523	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6RBD8
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought		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)
		81793.49	

(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 Brown, Tonya, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3916 N Florissant Ave Apt 204		Amount 68.40	
City Saint Louis	State MO	Zip Code 63107-2840	Transaction ID : VN7CZA6RAC9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brown, Twanna, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 8102 N Broadway		Amount 68.40	
City Saint Louis	State MO	Zip Code 63147-2419	Transaction ID : VN7CZA6R9R1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Browning, Kenyetta, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 330 Avon Lake Dr		Amount 17.10	
City Durham	State NC	Zip Code 27713-3415	Transaction ID : VN7CZA6QHC6
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	153.90
(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 Browning, Kenyetta, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 330 Avon Lake Dr		Amount 17.10	
City Durham	State NC	Zip Code 27713-3415	Transaction ID : VN7CZA6QJN7
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Browning, Kenyetta, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 330 Avon Lake Dr		Amount 17.10	
City Durham	State NC	Zip Code 27713-3415	Transaction ID : VN7CZA6QPG7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Browning, Kenyetta, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 330 Avon Lake Dr		Amount 17.10	
City Durham	State NC	Zip Code 27713-3415	Transaction ID : VN7CZA6QQS1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Bryant, Jennifer, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 11859 Galba Dr		Amount 68.40	
City Florissant	State MO	Zip Code 63033-6814	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6RC24
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought 81793.49		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 Bryant-Spencer, Brianna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 11859 Galba Dr		Amount 68.40	
City Florissant	State MO	Zip Code 63033-6814	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6RAP8
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought 81793.49		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 Budget -Cincinnati		Date of Public Distribution/Dissemination 10 / 28 / 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	Transaction ID : VN7CZA6PXZ2
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	148.17
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 11.73	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PY00
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 7.64	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PY34
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 16.54	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PY42
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	35.91
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 14.44	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PY50
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 7.31	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PY68
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PY76
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.80
(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 Budget -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 7.66	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6PY84
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 11.73	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6PY91
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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	Transaction ID : VN7CZA6PYC5
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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.....	▶	30.76
(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 -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 11.73	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PYD3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 7.64	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PYG7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 16.54	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PYH5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 14.44	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6PYJ3
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Budget -Cincinnati		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 7.31	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6PYK0
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Budget -Cincinnati		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6PYM8
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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.....▶	33.80
(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 Budget -Cincinnati		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 7.66	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PYN6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 11.73	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PYP4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 11.37	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PYS8
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	30.76
(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 -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 11.73	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PYT6
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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 7.64	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PYX9
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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 16.54	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PYY7
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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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		897326.39	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 14.44	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PYZ5
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 7.31	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PZ03
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PZ11
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.80
(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 Budget -Cincinnati		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 7.66	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PZ29

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 11.73	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PZ37

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 10 / 28 / 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: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PZ61

(a) SUBTOTAL of Itemized Independent Expenditures.....	30.76
(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 -Cincinnati		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 11.73	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PZ78
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 7.64	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PZA2
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 16.54	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PZB0
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 14.44	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PZC6
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 7.31	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PZD4
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PZE2
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.80
(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 Budget -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 7.66	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PZF0
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 212 W 4th St		Amount 11.73	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA6PZG8
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 19.89	
City Bala Cynwyd	State PA	Zip Code 19004-1617	Transaction ID : VN7CZA6P1X7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.28
(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 Budget-Bala Cynwyd		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 23.89	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P1Y5

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 25.39	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P1Z3

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.98	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P201

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.26
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 25.74	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P219

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 29.42	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P227

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.37	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P235

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.53
(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 Budget-Bala Cynwyd		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 23.53	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6P268
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 Budget-Bala Cynwyd		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 19.89	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6P284
Name of Federal Candidate Supported or Opposed by Expenditure: McGinty, Kathleen, , ,		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	

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 23.89	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6P292
Name of Federal Candidate Supported or Opposed by Expenditure: McGinty, Kathleen, , ,		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.....	67.31
(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 Budget-Bala Cynwyd		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 25.39	
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: McGinty, Kathleen, , ,		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)	
		2016	

Transaction ID : VN7CZA6P2A0

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.98	
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: McGinty, Kathleen, , ,		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)	
		2016	

Transaction ID : VN7CZA6P2B8

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 25.74	
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: McGinty, Kathleen, , ,		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)	
		2016	

Transaction ID : VN7CZA6P2C6

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.11
(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 Budget-Bala Cynwyd		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 29.42	
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: McGinty, Kathleen, , ,		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)	
		2016	
		368876.35	

Transaction ID : VN7CZA6P2D4

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.37	
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: McGinty, Kathleen, , ,		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)	
		2016	
		368876.35	

Transaction ID : VN7CZA6P2E2

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1 Belmont Ave		Amount 23.53	
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: McGinty, Kathleen, , ,		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)	
		2016	
		368876.35	

Transaction ID : VN7CZA6P2H5

(a) SUBTOTAL of Itemized Independent Expenditures.....	77.32
(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 Budget-Chicago		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3721 N Broadway St		Amount 27.33	
City Chicago	State IL	Zip Code 60613-4104	
Purpose of Expenditure Rental Van		Category/Type	Transaction ID : VN7CZA6NV33
Name of Federal Candidate Supported or Opposed by Expenditure: Kirk, Mark, , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One:	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
102711.83		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-Chicago		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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	Transaction ID : VN7CZA6NVT1
Name of Federal Candidate Supported or Opposed by Expenditure: Kirk, Mark, , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One:	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
102711.83		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-Chicago		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3721 N Broadway St		Amount 27.33	
City Chicago	State IL	Zip Code 60613-4104	
Purpose of Expenditure Rental Van		Category/Type	Transaction ID : VN7CZA6NVV9
Name of Federal Candidate Supported or Opposed by Expenditure: Duckworth, Tammy, , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
102711.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 MM / DD / YYYY 10 / 28 / 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: Duckworth, Tammy, , ,		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 : VN7CZA6NVW7	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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: Clinton, Hillary, , ,		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 : VN7CZA6PMZ3	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.65	
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: Clinton, Hillary, , ,		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 : VN7CZA6PN01	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.98
(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-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 11.40	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PN19
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: Clinton, Hillary, , ,		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 Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.16	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PN27
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: Clinton, Hillary, , ,		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 Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.12	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PN35
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: Clinton, Hillary, , ,		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) ▶	

(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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.59	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PN43
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.42	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PN51
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.04	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PN69
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.05
(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-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.66	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PN76
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.66	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PN84
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.43	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PN92
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.75
(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 Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.43	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PNA0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 14.23	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PNB8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 14.77	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PNC6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.43
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.21	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PND4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 11.09	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PNE2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.08	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PNQ3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.38
(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 Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.65	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PNR1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 11.40	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PNS9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.16	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PNT7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.12	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PNV4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.59	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PNW2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.42	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PNX0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.04	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PNY8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.66	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PNZ6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.66	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PP02
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.36
(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 Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.43	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PP10
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.43	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PP28
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 14.23	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PP36
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.09
(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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 14.77	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PP44
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.21	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PP51
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 11.09	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PP69
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.07
(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 Budget-Cleveland		Date of Public Distribution/Dissemination 10 / 28 / 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: Portman, Rob, , ,		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)	
		897326.39	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.65	
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: Portman, Rob, , ,		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)	
		897326.39	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 11.40	
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: Portman, Rob, , ,		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)	
		897326.39	

(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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.16	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PPJ4
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.12	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PPK2
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.59	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PPM0
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <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 MM / DD / YYYY 10 / 28 / 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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.04	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.66	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.12
(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 Budget-Cleveland		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.66	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.43	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.43	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.52
(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-Cleveland		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 14.23	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 14.77	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.21	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.21
(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 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 11.09	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 10 / 28 / 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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.65	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.82
(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-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 11.40	
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: Strickland, Ted, , ,		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 : VN7CZA6PQ96	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.16	
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: Strickland, Ted, , ,		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 : VN7CZA6PQA4	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.12	
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: Strickland, Ted, , ,		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 : VN7CZA6PQB2	

(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 MM / DD / YYYY 10 / 28 / 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: Strickland, Ted, , ,		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 : VN7CZA6PQC0	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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: Strickland, Ted, , ,		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 : VN7CZA6PQD7	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 13.04	
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: Strickland, Ted, , ,		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 : VN7CZA6PQE5	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.05
(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-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.66	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PQF3
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.66	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PQG1
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.43	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA6PQH9
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.75
(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 Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.43	
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: Strickland, Ted, , ,		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 : VN7CZA6PQJ7	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 14.23	
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: Strickland, Ted, , ,		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 : VN7CZA6PQK5	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 14.77	
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: Strickland, Ted, , ,		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 : VN7CZA6PQM3	

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.43
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 12.21	
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: Strickland, Ted, , ,		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)	
		897326.39	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1799 Superior Ave		Amount 11.09	
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: Strickland, Ted, , ,		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)	
		897326.39	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.26	
City Greensboro	State NC	Zip Code 27407-4619	
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: Burr, Richard, , ,		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)	
		236458.09	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.26	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R5Q4
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.77	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R5R2
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.72	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R5S0
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.75
(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 Budget-Greensboro		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.06	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R5T8
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.06	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R5V6
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 8.59	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R5W4
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	26.71
(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-Greensboro		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.26	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R663
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.26	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R671
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.77	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R689
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.29
(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 Budget-Greensboro		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.72	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R696
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.06	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R6A4
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.06	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R6B2
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.84
(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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 8.59	
City Greensboro	State NC	Zip Code 27407-4619	
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: Ross, Deborah, , ,		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 : VN7CZA6R6C0	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.26	
City Greensboro	State NC	Zip Code 27407-4619	
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: Clinton, Hillary, , ,		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 : VN7CZA6R7P2	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.26	
City Greensboro	State NC	Zip Code 27407-4619	
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: Clinton, Hillary, , ,		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 : VN7CZA6R7Q0	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.11
(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 Budget-Greensboro		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.77	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R7R8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.72	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R7S6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.06	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R7T4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.55
(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-Greensboro		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.06	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R7V1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 8.59	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R7W9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.26	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R866
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	26.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.26	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R874
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.77	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R882
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.72	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R890
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.75
(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 Budget-Greensboro		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.06	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R8A8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 9.06	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R8B6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 10 / 28 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 8.59	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA6R8C4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	26.71
(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-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 5.23	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		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 : VN7CZA6P6V1	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 5.28	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		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 : VN7CZA6P6W9	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 5.82	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		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 : VN7CZA6P6X7	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.33
(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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 5.09	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		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 : VN7CZA6P6Y5	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 5.23	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		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 : VN7CZA6P6Z3	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 5.11	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		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 : VN7CZA6P701	

(a) SUBTOTAL of Itemized Independent Expenditures.....	15.43
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 5.11	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		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 : VN7CZA6P719	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 4.52	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		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 : VN7CZA6P727	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 8700 S Orange Blossom Trl		Amount 6.42	
City Orlando	State FL	Zip Code 32809-7912	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		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 : VN7CZA6P735	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.05
(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-Orlando		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8700 S Orange Blossom Trl		Amount 6.42	
City Orlando	State FL	Zip Code 32809-7912	Transaction ID : VN7CZA6P743
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement 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 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 20.64	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA6P7A0
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement 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 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 20.84	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA6P7B8
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	47.90
(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 Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 22.98	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		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)	
		2016	
		94857.42	

Transaction ID : VN7CZA6P7C6

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 20.11	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		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)	
		2016	
		94857.42	

Transaction ID : VN7CZA6P7D4

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 20.63	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		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)	
		2016	
		94857.42	

Transaction ID : VN7CZA6P7E2

(a) SUBTOTAL of Itemized Independent Expenditures.....	63.72
(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 Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 20.17	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA6P7F9
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		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-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 20.17	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA6P7G7
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		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-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 17.84	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA6P7H5
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	58.18
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 8700 S Orange Blossom Trl		Amount 25.33	
City Orlando	State FL	Zip Code 32809-7912	Transaction ID : VN7CZA6P7J3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		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-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 8700 S Orange Blossom Trl		Amount 25.33	
City Orlando	State FL	Zip Code 32809-7912	Transaction ID : VN7CZA6P7K1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		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-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 20.64	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA6P7S8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	71.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 20.84	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6P7T6
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		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) ▶
		1672274.44	2016

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 22.98	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6P7V4
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		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) ▶
		1672274.44	2016

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 20.11	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6P7W2
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		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) ▶
		1672274.44	2016

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	63.93
(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-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 20.63	
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: Clinton, Hillary, , ,		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) ▶	
		2016 1672274.44	

Transaction ID : VN7CZA6P7X0

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 20.17	
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: Clinton, Hillary, , ,		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) ▶	
		2016 1672274.44	

Transaction ID : VN7CZA6P7Y8

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 20.17	
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: Clinton, Hillary, , ,		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) ▶	
		2016 1672274.44	

Transaction ID : VN7CZA6P7Z6

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	60.97
(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-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 17.84	
City Orlando	State FL	Zip Code 32804-6911	
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: Clinton, Hillary, , ,		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 : VN7CZA6P804	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 8700 S Orange Blossom Trl		Amount 25.33	
City Orlando	State FL	Zip Code 32809-7912	
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: Clinton, Hillary, , ,		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 : VN7CZA6P812	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 8700 S Orange Blossom Trl		Amount 25.33	
City Orlando	State FL	Zip Code 32809-7912	
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: Clinton, Hillary, , ,		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 : VN7CZA6P820	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.50
(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-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 5.23	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA6P887
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 5.28	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA6P895
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 5.82	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA6P8A3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	16.33
(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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 5.09	
City Orlando	State FL	Zip Code 32804-6911	
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: Trump, Donald, , ,		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 : VN7CZA6P8B1

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 5.23	
City Orlando	State FL	Zip Code 32804-6911	
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: Trump, Donald, , ,		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 : VN7CZA6P8C9

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 5.11	
City Orlando	State FL	Zip Code 32804-6911	
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: Trump, Donald, , ,		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 : VN7CZA6P8D6

(a) SUBTOTAL of Itemized Independent Expenditures.....	15.43
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 5.11	
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: Trump, Donald, , ,		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 4.52	
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: Trump, Donald, , ,		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 8700 S Orange Blossom Trl		Amount 6.42	
City Orlando	State FL	Zip Code 32809-7912	
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: Trump, Donald, , ,		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.....	16.05
(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-Orlando		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 8700 S Orange Blossom Trl		Amount 6.42	
City Orlando	State FL	Zip Code 32809-7912	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Transaction ID : VN7CZA6P8H8

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 625 Stanwix St		Amount 24.22	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Transaction ID : VN7CZA6NY77

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 625 Stanwix St		Amount 23.80	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Transaction ID : VN7CZA6NY85

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	54.44
(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-Pittsburgh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address Landside Terminal #4000		Amount 20.45	
City Pittsburgh	State PA	Zip Code 15231	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6NY93
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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-Pittsburgh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 625 Stanwix St		Amount 24.22	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6NYA1
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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-Pittsburgh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 625 Stanwix St		Amount 24.22	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6NYB9
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	▶	68.89
(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 Budget-Pittsburgh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 625 Stanwix St		Amount 24.22	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6NYC7
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		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) _____
		1672274.44	2016

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 625 Stanwix St		Amount 23.80	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6NYD4
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		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) _____
		1672274.44	2016

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 625 Stanwix St		Amount 24.22	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6NYE2
Name of Federal Candidate Supported or Opposed by Expenditure: McGinty, Kathleen, , ,		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) _____
		368876.35	2016

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.24
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 10 / 28 / 2016	
Mailing Address 625 Stanwix St		Amount 23.80	
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: McGinty, Kathleen, , ,		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 Budget-Pittsburgh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address Landside Terminal #4000		Amount 20.45	
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: McGinty, Kathleen, , ,		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 Budget-Pittsburgh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 625 Stanwix St		Amount 24.22	
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: McGinty, Kathleen, , ,		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)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.47
(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 Budget-Pittsburgh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 625 Stanwix St		Amount 24.22	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NYJ4

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 625 Stanwix St		Amount 24.22	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NYK2

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 625 Stanwix St		Amount 23.80	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NYM0

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.24
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.24	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.72	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.26	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.22
(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 Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 8.05	
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: Burr, Richard, , ,		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 : VN7CZA6Q7G6	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.29	
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: Burr, Richard, , ,		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 : VN7CZA6Q7H4	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.13	
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: Burr, Richard, , ,		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 : VN7CZA6Q7J2	

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.47
(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 Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.24	
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: Ross, Deborah, , ,		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 : VN7CZA6Q836	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.72	
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: Ross, Deborah, , ,		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 : VN7CZA6Q844	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.26	
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: Ross, Deborah, , ,		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 : VN7CZA6Q852	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.22
(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 Budget-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 8.05	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6Q860
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.29	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6Q878
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.13	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6Q886
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.47
(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 Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.24	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QA55
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.72	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QA63
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.26	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QA71
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.22
(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 Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 8.05	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QA89
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.29	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QA97
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.13	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QAA5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	20.47
(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 Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.24	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QAV9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.72	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QAW7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.26	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QAX5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.22
(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 Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 8.05	
City Raleigh	State NC	Zip Code 27623	
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: Trump, Donald, , ,		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 : VN7CZA6QAY3

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.29	
City Raleigh	State NC	Zip Code 27623	
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: Trump, Donald, , ,		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 : VN7CZA6QAZ1

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.13	
City Raleigh	State NC	Zip Code 27623	
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: Trump, Donald, , ,		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 : VN7CZA6QB09

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.47
(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 Budget-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 4.52	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 4.52	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.25	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	11.29
(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 Budget-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.25	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.32	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.19	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.76
(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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.19	
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: Burr, Richard, ,		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 : VN7CZA6QS31

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 4.52	
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: Ross, Deborah, ,		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 : VN7CZA6QSE8

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 4.52	
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: Ross, Deborah, ,		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 : VN7CZA6QSF5

(a) SUBTOTAL of Itemized Independent Expenditures.....	14.23
(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 Budget-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.25	
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: Ross, Deborah, , ,		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 : VN7CZA6QSG3	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.25	
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: Ross, Deborah, , ,		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 : VN7CZA6QSH1	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.32	
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: Ross, Deborah, , ,		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 : VN7CZA6QJS9	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.82
(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-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.19	
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: Ross, Deborah, , ,		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 : VN7CZA6QSK7	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.19	
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: Ross, Deborah, , ,		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 : VN7CZA6QSM5	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 4.52	
City Raleigh	State NC	Zip Code 27623	
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: Clinton, Hillary, , ,		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 : VN7CZA6QV10	

(a) SUBTOTAL of Itemized Independent Expenditures.....	14.90
(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 Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 4.52	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QV28
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.25	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QV36
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.25	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QV44
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.02
(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 Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.32	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QV52
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.19	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QV60
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.19	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6QV78
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	15.70
(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 Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 4.52	
City Raleigh	State NC	Zip Code 27623	
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: Trump, Donald, , ,		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	
		1672274.44	

Transaction ID : VN7CZA6QVJ3

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 4.52	
City Raleigh	State NC	Zip Code 27623	
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: Trump, Donald, , ,		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	
		1672274.44	

Transaction ID : VN7CZA6QVK1

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.25	
City Raleigh	State NC	Zip Code 27623	
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: Trump, Donald, , ,		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	
		1672274.44	

Transaction ID : VN7CZA6QVM9

(a) SUBTOTAL of Itemized Independent Expenditures.....	11.29
(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 Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 2.25	
City Raleigh	State NC	Zip Code 27623	
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: Trump, Donald, , ,		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 : VN7CZA6QVN6

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.32	
City Raleigh	State NC	Zip Code 27623	
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: Trump, Donald, , ,		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 : VN7CZA6QVP4

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.19	
City Raleigh	State NC	Zip Code 27623	
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: Trump, Donald, , ,		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 : VN7CZA6QVQ2

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.76
(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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.19	
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: Trump, Donald, , ,		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 : VN7CZA6QVR0	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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: Burr, Richard, , ,		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 : VN7CZA6R5M1	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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: Burr, Richard, , ,		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 : VN7CZA6R5N8	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	19.21
(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-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 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: Ross, Deborah, , ,		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 : VN7CZA6R647	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 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: Ross, Deborah, , ,		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 : VN7CZA6R655	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 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: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 : VN7CZA6R7M6	

(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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6R7N4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6R841
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA6R858
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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-St. Louis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 32.05	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA6RGD0
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <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: Kander, Jason, , ,		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		81793.49	

Full Name (Last, First, Middle Initial) of Payee Budget-St. Louis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 31.72	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA6RGE8
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <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: Kander, Jason, , ,		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		81793.49	

Full Name (Last, First, Middle Initial) of Payee Budget-St. Louis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 31.79	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA6RGF6
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <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: Kander, Jason, , ,		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		81793.49	

(a) SUBTOTAL of Itemized Independent Expenditures.....	95.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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-St. Louis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 20.62	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA6RGG4
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		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-St. Louis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 31.07	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA6RGH2
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		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-St. Louis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 31.07	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA6RGJ0
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	82.76
(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-St. Louis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 30.78	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA6RGK7
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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-St. Louis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 31.34	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA6RGM5
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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-St. Louis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 37.76	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA6RGN3
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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.....	99.88
(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 Budget-St. Louis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 37.76	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA6RGP1
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		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-St. Louis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 37.89	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA6RQG9
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		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-St. Louis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 37.95	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA6RGR7
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	113.60
(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-St. Louis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 37.95	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA6RGS5
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 9.13	
City Upper Arlington	State OH	Zip Code 43212-1158	Transaction ID : VN7CZA6NRS6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.47	
City Upper Arlington	State OH	Zip Code 43212-1158	Transaction ID : VN7CZA6NRT4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	59.55
(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-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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 : VN7CZA6NRV2
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 7.88	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6NRW0
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.57	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6NRX8
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....▶	32.88
(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 Budget-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 9.23	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NRY6

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 13.96	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NRZ4

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NS43

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.32
(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 Budget-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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 : VN7CZA6NS51
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Budget-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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 : VN7CZA6NS69
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Budget-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 7.88	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6NS77
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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.....▶	32.78
(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-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.57	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NS85

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 9.23	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NS93

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 13.96	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NSA1

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.76
(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-Upper Arlington		Date of Public Distribution/Dissemination 10 / 28 / 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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 10 / 28 / 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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 10 / 28 / 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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 7.88	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6NSJ4
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		Office Sought: <input checked="" 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 897326.39		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-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.57	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6NSK2
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		Office Sought: <input checked="" 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 897326.39		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-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 9.23	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA6NSM0
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		Office Sought: <input checked="" 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 897326.39		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.....	29.68
(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-Upper Arlington		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 13.96	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 10 / 28 / 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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 10 / 28 / 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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 MM / DD / YYYY 10 / 28 / 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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NSW1

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 7.88	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NSX9

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 12.57	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NSY7

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.88
(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 Budget-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 9.23	
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: Strickland, Ted, , ,		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 Budget-Upper Arlington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 13.96	
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: Strickland, Ted, , ,		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 Buford, Taylor, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1317 S Elm Ave		Amount 17.10	
City Sanford	State FL	Zip Code 32771-3427	
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: Burr, Richard, , ,		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.....	40.29
(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 Buford, Taylor, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1317 S Elm Ave		Amount 17.10	
City Sanford	State FL	Zip Code 32771-3427	Transaction ID : VN7CZA6Q267
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: Ross, Deborah, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Buford, Taylor, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1317 S Elm Ave		Amount 17.10	
City Sanford	State FL	Zip Code 32771-3427	Transaction ID : VN7CZA6Q563
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: Clinton, Hillary, , ,		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 1672274.44			

Full Name (Last, First, Middle Initial) of Payee Buford, Taylor, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1317 S Elm Ave		Amount 17.10	
City Sanford	State FL	Zip Code 32771-3427	Transaction ID : VN7CZA6Q664
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: Trump, Donald, , ,		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 1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Buford, Taylor, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1317 S Elm Ave		Amount 3.13	
City Sanford	State FL	Zip Code 32771-3427	Transaction ID : VN7CZA6QC83
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: Burr, Richard, , ,		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 Buford, Taylor, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1317 S Elm Ave		Amount 3.13	
City Sanford	State FL	Zip Code 32771-3427	Transaction ID : VN7CZA6QCP3
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: Ross, Deborah, , ,		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 Buford, Taylor, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1317 S Elm Ave		Amount 3.13	
City Sanford	State FL	Zip Code 32771-3427	Transaction ID : VN7CZA6QE05
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: Clinton, Hillary, , ,		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.....	9.39
(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 Buford, Taylor, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1317 S Elm Ave		Amount 3.13	
City Sanford	State FL	Zip Code 32771-3427	
Purpose of Expenditure Per Diem		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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QEE6

Full Name (Last, First, Middle Initial) of Payee Bullock, Chad, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1105 Red Oak Ave		Amount 17.10	
City Durham	State NC	Zip Code 27707-4923	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QHJ4

Full Name (Last, First, Middle Initial) of Payee Bullock, Chad, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1105 Red Oak Ave		Amount 17.10	
City Durham	State NC	Zip Code 27707-4923	
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QJV5

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.33
(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 Bullock, Chad, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1105 Red Oak Ave		Amount 17.10	
City Durham	State NC	Zip Code 27707-4923	Transaction ID : VN7CZA6QPP4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Bullock, Chad, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1105 Red Oak Ave		Amount 17.10	
City Durham	State NC	Zip Code 27707-4923	Transaction ID : VN7CZA6QQZ8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Bullock, Glenda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PRW9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Bullock, Glenda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTE2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bullock, Glenda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PW07
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bullock, Glenda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PXJ0
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Bullock, Tyree, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 607 Homeland Ave		Amount 17.10	
City Durham	State NC	Zip Code 27707-4020	Transaction ID : VN7CZA6QGWO
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bullock, Tyree, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 607 Homeland Ave		Amount 17.10	
City Durham	State NC	Zip Code 27707-4020	Transaction ID : VN7CZA6QJ51
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bullock, Tyree, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 607 Homeland Ave		Amount 17.10	
City Durham	State NC	Zip Code 27707-4020	Transaction ID : VN7CZA6QP01
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Bullock, Tyree, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 607 Homeland Ave		Amount 17.10	
City Durham	State NC	Zip Code 27707-4020	Transaction ID : VN7CZA6QQ94
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Burda, Holly, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1513 Willomore St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3349	Transaction ID : VN7CZA6QYG5
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Burda, Holly, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1513 Willomore St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3349	Transaction ID : VN7CZA6QZR9
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	62.70
(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 Burda, Holly, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1513 Willomore St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3349	Transaction ID : VN7CZA6R3G5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Burda, Holly, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1513 Willomore St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3349	Transaction ID : VN7CZA6R4R1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Burgess, Marzelle, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 231 Goat Hill Ln		Amount 17.10	
City Sanford	State NC	Zip Code 27330-9255	Transaction ID : VN7CZA6Q0Y1
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	62.70
(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 Burgess, Marzelle, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 231 Goat Hill Ln		Amount 17.10	
City Sanford	State NC	Zip Code 27330-9255	Transaction ID : VN7CZA6Q1Y4
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: Ross, Deborah, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Burgess, Marzelle, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 231 Goat Hill Ln		Amount 17.10	
City Sanford	State NC	Zip Code 27330-9255	Transaction ID : VN7CZA6Q4Y0
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Burgess, Marzelle, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 231 Goat Hill Ln		Amount 17.10	
City Sanford	State NC	Zip Code 27330-9255	Transaction ID : VN7CZA6Q5Y1
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: Trump, Donald, , ,		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		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Burghoff, Grace, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2300 Timberview Rd Apt 107		Amount 89.16	
City Kirkwood	State MO	Zip Code 63122-6753	Transaction ID : VN7CZA6R9J4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Burnette, Ronn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3734 Beulah Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43224-2615	Transaction ID : VN7CZA6NKE1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Burnette, Ronn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3734 Beulah Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43224-2615	Transaction ID : VN7CZA6NN36
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	157.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Burnette, Ronn, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3734 Beulah Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43224-2615	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NPR3
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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		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)
		897326.39	

Full Name (Last, First, Middle Initial) of Payee Burnette, Ronn, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3734 Beulah Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43224-2615	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NRD2
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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		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)
		897326.39	

Full Name (Last, First, Middle Initial) of Payee Burton, Jeffery, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1443 Matador Dr		Amount 89.16	
City Gotha	State FL	Zip Code 34734-4552	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6R9Y9
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought		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)
		81793.49	

(a) SUBTOTAL of Itemized Independent Expenditures.....	157.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Burton, Jeffery, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1443 Matador Dr		Amount 12.50	
City Gotha	State FL	Zip Code 34734-4552	Transaction ID : VN7CZA6RJK0
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bush, Quincy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PS82
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bush, Quincy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTT7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	80.90
(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 Bush, Quincy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PWC0
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bush, Quincy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PXY5
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Butler, Philip, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 24.77	
City Carrboro	State NC	Zip Code 27510-1837	Transaction ID : VN7CZA6QH8
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	93.17
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Butler, Philip, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 24.77	
City Carrboro	State NC	Zip Code 27510-1837	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QJS9
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09		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 Butler, Philip, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 24.77	
City Carrboro	State NC	Zip Code 27510-1837	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QPM9
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Butler, Philip, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 24.77	
City Carrboro	State NC	Zip Code 27510-1837	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QQX2
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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.....	74.31
(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 Butt, Samir, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 737 Melon Ter Apt B		Amount 68.40	
City Philadelphia	State PA	Zip Code 19123-3428	Transaction ID : VN7CZA6NYT7
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Butt, Samir, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 737 Melon Ter Apt B		Amount 68.40	
City Philadelphia	State PA	Zip Code 19123-3428	Transaction ID : VN7CZA6P0E6
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: McGinty, Kathleen, , ,		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		368876.35	

Full Name (Last, First, Middle Initial) of Payee Caffey, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 14401 Kingsford Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44128-1071	Transaction ID : VN7CZA6PAD0
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: Clinton, Hillary, , ,		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		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Caffey, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 14401 Kingsford Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44128-1071	Transaction ID : VN7CZA6PDC9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Caffey, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 14401 Kingsford Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44128-1071	Transaction ID : VN7CZA6PGB7
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Caffey, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 14401 Kingsford Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44128-1071	Transaction ID : VN7CZA6PKA5
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Callaway, Micah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PR15
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Callaway, Micah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PSK8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Callaway, Micah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PV53
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Callaway, Micah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PWQ6
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Callen, Robert, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3415 Pennsylvania Ave		Amount 89.16	
City Saint Louis	State MO	Zip Code 63118-2927	Transaction ID : VN7CZA6R9K2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Callum, Sean, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 314 NW 5th Ave # 121		Amount 68.40	
City Portland	State OR	Zip Code 97209-3830	Transaction ID : VN7CZA6RA62
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	191.76
(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 Callum, Sean, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 314 NW 5th Ave # 121		Amount 12.50	
City Portland	State OR	Zip Code 97209-3830	Transaction ID : VN7CZA6RJV3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Camacho, Daimaris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1304 Orthodox St		Amount 21.38	
City Philadelphia	State PA	Zip Code 19124-3623	Transaction ID : VN7CZA6P071
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Camacho, Daimaris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1304 Orthodox St		Amount 21.38	
City Philadelphia	State PA	Zip Code 19124-3623	Transaction ID : VN7CZA6P1V1
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	55.26
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Campbell-Scott, Marcus, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6428 N Norwood St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2508	Transaction ID : VN7CZA6NZM3
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 checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Campbell-Scott, Marcus, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6428 N Norwood St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2508	Transaction ID : VN7CZA6P181
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: McGinty, Kathleen, , ,		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		368876.35	

Full Name (Last, First, Middle Initial) of Payee Campoverde, Julian, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1575 Pier St		Amount 34.20	
City Clermont	State FL	Zip Code 34711-1942	Transaction ID : VN7CZA6P3J4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <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: Rubio, Marco, , ,		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		94857.42	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Campoverde, Julian, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1575 Pier St		Amount 34.20	
City Clermont	State FL	Zip Code 34711-1942	Transaction ID : VN7CZA6P515
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Campoverde, Julian, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1575 Pier St		Amount 34.20	
City Clermont	State FL	Zip Code 34711-1942	Transaction ID : VN7CZA6P600
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Campoverde, Julian, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1575 Pier St		Amount 34.20	
City Clermont	State FL	Zip Code 34711-1942	Transaction ID : VN7CZA6P6K8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Candlewood Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 39.46	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 39.46	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 40.26	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

(a) SUBTOTAL of Itemized Independent Expenditures.....	119.18
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 39.46	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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 2016 <input type="checkbox"/> Other (specify)	
		81793.49	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 39.46	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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 2016 <input type="checkbox"/> Other (specify)	
		81793.49	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 39.46	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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 2016 <input type="checkbox"/> Other (specify)	
		81793.49	

(a) SUBTOTAL of Itemized Independent Expenditures.....	118.38
(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 Candlewood Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 39.46	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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 2016 <input type="checkbox"/> Other (specify)	
		81793.49	

Transaction ID : VN7CZA6RFR4

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 39.46	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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 2016 <input type="checkbox"/> Other (specify)	
		81793.49	

Transaction ID : VN7CZA6RFS2

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 38.23	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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 2016 <input type="checkbox"/> Other (specify)	
		81793.49	

Transaction ID : VN7CZA6RFW6

(a) SUBTOTAL of Itemized Independent Expenditures.....	117.15
(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 Candlewood Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 39.46	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Transaction ID : VN7CZA6RFX4

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 39.46	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Transaction ID : VN7CZA6RFY2

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 39.46	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Transaction ID : VN7CZA6RFZ9

(a) SUBTOTAL of Itemized Independent Expenditures.....	118.38
(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 Candlewood Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 39.46	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Transaction ID : VN7CZA6RG07

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 39.46	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Transaction ID : VN7CZA6RG15

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Earth City		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 38.42	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Transaction ID : VN7CZA6RG23

(a) SUBTOTAL of Itemized Independent Expenditures.....	117.34
(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 Candlewood Suites-Earth City		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 41.17	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA6RG81
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO 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 Candlewood Suites-Earth City		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 41.17	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA6RG98
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO 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 Candlewood Suites-Earth City		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 41.17	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA6RGA6
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO 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.....	123.51
(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 Candlewood Suites-Earth City		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 41.17	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Transaction ID : VN7CZA6RGB4

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Earth City		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 41.17	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Lodging		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Transaction ID : VN7CZA6RGC2

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	
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: Burr, Richard, , ,		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)	
		236458.09	

Transaction ID : VN7CZA6Q7K0

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.64
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	
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: Burr, Richard, , ,		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 Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	
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: Burr, Richard, , ,		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 Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	
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: Burr, Richard, , ,		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.....	29.31
(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 Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6Q7S7
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6Q7T5
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6Q7V3
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.13
(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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6Q7W1
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6Q7X9
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6Q7Y7
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.13
(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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6Q7Z4
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6Q802
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6Q893
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	30.72
(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 Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	
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: Ross, Deborah, , ,		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 : VN7CZA6Q8A1

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	
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: Ross, Deborah, , ,		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 : VN7CZA6Q8B9

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	
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: Ross, Deborah, , ,		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 : VN7CZA6Q8E3

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.31
(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 Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.13
(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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6Q8J5
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	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6Q8K2
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	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6Q8M0
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	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09			

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.13
(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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA6Q8N8
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09		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 Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA6Q8P6
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09		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 Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Transaction ID : VN7CZA6QAB3
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	30.72
(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 Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6QAC1

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6QAD9

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6QAG2

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.31
(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 Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6QAH8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Suites-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6QAJ8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Suites-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6QAK6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.13
(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 Suites-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6QAM4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Suites-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6QAN2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Suites-Raleigh		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6QAP0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.13
(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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		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: Clinton, Hillary, , ,		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 : VN7CZA6QAQ8

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		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: Clinton, Hillary, , ,		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 : VN7CZA6QAR6

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		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: Trump, Donald, , ,		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 : VN7CZA6QB17

(a) SUBTOTAL of Itemized Independent Expenditures.....	30.72
(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 Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.31
(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 Candlewood Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6QB74
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6QB82
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6QB90
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.13
(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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6QBA8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6QBB6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6QBC4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.13
(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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6QBD1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Suites-Raleigh		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 10.71	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA6QBE9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Canty, Ashley, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 852 Rugby St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-1946	Transaction ID : VN7CZA6QZ91
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	44.22
(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 Canty, Ashley, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 852 Rugby St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-1946	Transaction ID : VN7CZA6R0H7
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Canty, Ashley, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 852 Rugby St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-1946	Transaction ID : VN7CZA6R493
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Canty, Ashley, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 852 Rugby St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-1946	Transaction ID : VN7CZA6R5H7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Capitol Square Printing		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 59 E Gay St		Amount 193.88	
City Columbus	State OH	Zip Code 43215-3103	Transaction ID : VN7CZA6NT52
Purpose of Expenditure Printing	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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Capitol Square Printing		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 59 E Gay St		Amount 193.88	
City Columbus	State OH	Zip Code 43215-3103	Transaction ID : VN7CZA6NT60
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Capitol Square Printing		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 59 E Gay St		Amount 193.88	
City Columbus	State OH	Zip Code 43215-3103	Transaction ID : VN7CZA6NT78
Purpose of Expenditure Printing	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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	581.64
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Capitol Square Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 59 E Gay St		Amount 193.88	
City Columbus	State OH	Zip Code 43215-3103	Transaction ID : VN7CZA6NT86
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Carlberg, Robert, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 335 North St		Amount 68.40	
City Springdale	State PA	Zip Code 15144-1232	Transaction ID : VN7CZA6NWW9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Carlberg, Robert, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 335 North St		Amount 68.40	
City Springdale	State PA	Zip Code 15144-1232	Transaction ID : VN7CZA6NY10
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	330.68
(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 Carlier, Michaela, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PR49
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Carlier, Michaela, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PSP2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Carlier, Michaela, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PV87
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Carrier, Michaela, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PWT0
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Carlino, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3729 E 53rd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-1118	Transaction ID : VN7CZA6P948
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Carlino, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3729 E 53rd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-1118	Transaction ID : VN7CZA6PC37
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Carlino, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3729 E 53rd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-1118	Transaction ID : VN7CZA6PF25
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Carlino, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3729 E 53rd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-1118	Transaction ID : VN7CZA6PJ14
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Carpio, Jennileen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 605 Gull Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34759-4504	Transaction ID : VN7CZA6P361
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		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 Carpio, Jennileen, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 605 Gull Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34759-4504	Transaction ID : VN7CZA6P4N0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		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)	
		94857.42	

Full Name (Last, First, Middle Initial) of Payee Carpio, Jennileen, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 605 Gull Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34759-4504	Transaction ID : VN7CZA6P5W9
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: Clinton, Hillary, , ,		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)	
		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Carpio, Jennileen, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 605 Gull Dr		Amount 34.20	
City Kissimmee	State FL	Zip Code 34759-4504	Transaction ID : VN7CZA6P6F7
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: Trump, Donald, , ,		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)	
		1672274.44	

(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 Carter, Najiah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3507 Payne Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44114-4356	Transaction ID : VN7CZA6PB42
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Carter, Najiah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3507 Payne Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44114-4356	Transaction ID : VN7CZA6PE30
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Carter, Najiah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3507 Payne Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44114-4356	Transaction ID : VN7CZA6PH29
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Carter, Najiah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3507 Payne Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44114-4356	Transaction ID : VN7CZA6PM16
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Case, Kelli, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 8100 Bryan Rd Lot 5		Amount 17.10	
City Garner	State NC	Zip Code 27529-9148	Transaction ID : VN7CZA6Q1C2
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Case, Kelli, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 8100 Bryan Rd Lot 5		Amount 17.10	
City Garner	State NC	Zip Code 27529-9148	Transaction ID : VN7CZA6Q2C4
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 Case, Kelli, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8100 Bryan Rd Lot 5		Amount 17.10	
City Garner	State NC	Zip Code 27529-9148	Transaction ID : VN7CZA6Q5C1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Case, Kelli, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8100 Bryan Rd Lot 5		Amount 17.10	
City Garner	State NC	Zip Code 27529-9148	Transaction ID : VN7CZA6Q6C2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Casey, Kelly, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 701 Arlington St		Amount 94.11	
City Orlando	State FL	Zip Code 32805-1413	Transaction ID : VN7CZA6P320
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	128.31
(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 Casey, Kelly, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 701 Arlington St		Amount 94.11	
City Orlando	State FL	Zip Code 32805-1413	
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: Clinton, Hillary, , ,		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 Champer, Nolan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 66 E Maynard Ave		Amount 49.53	
City Columbus	State OH	Zip Code 43202-2941	
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: Clinton, Hillary, , ,		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 Champer, Nolan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 66 E Maynard Ave		Amount 49.53	
City Columbus	State OH	Zip Code 43202-2941	
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: Trump, Donald, , ,		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.....	193.17
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Champer, Nolan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 66 E Maynard Ave		Amount 49.53	
City Columbus	State OH	Zip Code 43202-2941	Transaction ID : VN7CZA6NP71
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Champer, Nolan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 66 E Maynard Ave		Amount 49.53	
City Columbus	State OH	Zip Code 43202-2941	Transaction ID : VN7CZA6NQW7
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cheng, Kenneth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 94.17	
City Seattle	State WA	Zip Code 98109	Transaction ID : VN7CZA6NYR1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	193.23
(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 Cheng, Kenneth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 94.17	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6P0C0
Name of Federal Candidate Supported or Opposed by Expenditure: McGinty, Kathleen, , ,		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 368876.35		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 Cheng, Kenneth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 12.50	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6P2M9
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Cheng, Kenneth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 12.50	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6P2P5
Name of Federal Candidate Supported or Opposed by Expenditure: McGinty, Kathleen, , ,		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 368876.35		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.....	119.17
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Cherubin, Reginald, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1126 Anchor St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1115	Transaction ID : VN7CZA6NZ96
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: Clinton, Hillary, , ,		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)	
		2016	
		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Cherubin, Reginald, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1126 Anchor St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1115	Transaction ID : VN7CZA6P0X4
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: McGinty, Kathleen, , ,		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)	
		2016	
		368876.35	

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 8.87	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PMQ0
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: Clinton, Hillary, , ,		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)	
		2016	
		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	145.67
(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 Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 6.87	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PMR8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 7.68	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PMS6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 6.89	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PMT4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.44
(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 Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 11.40	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PMV2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 17.74	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PMW0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 9.99	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PMX7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 8.87	
City Cleveland	State OH	Zip Code 44114-4413	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PNF0

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 6.87	
City Cleveland	State OH	Zip Code 44114-4413	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PNG8

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 7.68	
City Cleveland	State OH	Zip Code 44114-4413	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PNH5

(a) SUBTOTAL of Itemized Independent Expenditures.....	23.42
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 6.89	
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	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PNJ3

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 11.40	
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	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PNK1

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 17.74	
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	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PNM9

(a) SUBTOTAL of Itemized Independent Expenditures.....	36.03
(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 Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 9.99	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PNN7
Purpose of Expenditure Gas	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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 8.87	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PP77
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 6.87	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PP85
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	25.73
(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 Chester BP		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 7.68	
City Cleveland	State OH	Zip Code 44114-4413	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PP93

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 6.89	
City Cleveland	State OH	Zip Code 44114-4413	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PPA1

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 11.40	
City Cleveland	State OH	Zip Code 44114-4413	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PPB9

(a) SUBTOTAL of Itemized Independent Expenditures.....	25.97
(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 Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 17.74	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PPC7
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 9.99	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PPD5
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 8.87	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PPZ7
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	36.60
(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 Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 6.87	
City Cleveland	State OH	Zip Code 44114-4413	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PQ05

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 7.68	
City Cleveland	State OH	Zip Code 44114-4413	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PQ13

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 6.89	
City Cleveland	State OH	Zip Code 44114-4413	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PQ21

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.44
(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 Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 11.40	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PQ38
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 17.74	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PQ46
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 9.99	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA6PQ54
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Chester, Tarnesha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 9500 Wade Park Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44106-4038	Transaction ID : VN7CZA6PBG7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chester, Tarnesha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 9500 Wade Park Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44106-4038	Transaction ID : VN7CZA6PEF5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chester, Tarnesha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 9500 Wade Park Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44106-4038	Transaction ID : VN7CZA6PHE4
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Chester, Tarnesha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 9500 Wade Park Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44106-4038	Transaction ID : VN7CZA6PMD1
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clanton, Delano, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PRY5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clanton, Delano, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTG8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Clanton, Delano, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PW23
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clanton, Delano, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PXM6
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clardy, Leron, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PQX4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Clardy, Leron, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PSF7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clardy, Leron, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PV12
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clardy, Leron, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PWK5
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Clark, Clinton, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 17.10	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA6QGV2
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clark, Clinton, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 17.10	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA6QJ43
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clark, Clinton, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 17.10	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA6QNZ3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Clark, Clinton, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 17.10	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA6QQ87
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clark, Clinton, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 3.13	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA6QWK3
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clark, Clinton, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 3.13	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA6QWW5
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	23.36
(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 Clark, Clinton, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 3.13	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA6QXQ8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clark, Clinton, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 3.13	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA6QY09
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clark, Deborah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5410 Vista View Ct		Amount 24.77	
City Raleigh	State NC	Zip Code 27612-8710	Transaction ID : VN7CZA6Q130
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.03
(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 Clark, Deborah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5410 Vista View Ct		Amount 24.77	
City Raleigh	State NC	Zip Code 27612-8710	Transaction ID : VN7CZA6Q233
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: Ross, Deborah, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Clark, Deborah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5410 Vista View Ct		Amount 24.77	
City Raleigh	State NC	Zip Code 27612-8710	Transaction ID : VN7CZA6Q530
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Clark, Deborah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5410 Vista View Ct		Amount 24.77	
City Raleigh	State NC	Zip Code 27612-8710	Transaction ID : VN7CZA6Q630
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: Trump, Donald, , ,		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		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.31
(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 Clark, Dominique, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3954 Sullivan Ave		Amount 68.40	
City Saint Louis	State MO	Zip Code 63107-2021	Transaction ID : VN7CZA6RA38
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clarke, Marion, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6830 Grace Ave		Amount 44.61	
City North College Hill	State OH	Zip Code 45239-4831	Transaction ID : VN7CZA6PR73
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clarke, Marion, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6830 Grace Ave		Amount 44.61	
City North College Hill	State OH	Zip Code 45239-4831	Transaction ID : VN7CZA6PSS6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	157.62
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Clarke, Marion, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 6830 Grace Ave		Amount 44.61	
City North College Hill	State OH	Zip Code 45239-4831	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PVB1

Full Name (Last, First, Middle Initial) of Payee Clarke, Marion, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 6830 Grace Ave		Amount 44.61	
City North College Hill	State OH	Zip Code 45239-4831	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PWX4

Full Name (Last, First, Middle Initial) of Payee Clay, Santwon, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 968 Harlan Ave		Amount 68.40	
City Saint Louis	State MO	Zip Code 63147-2010	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6RBC0

(a) SUBTOTAL of Itemized Independent Expenditures.....	157.62
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Clement, Christina, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5130 Theodore St		Amount 34.20	
City Maple Heights	State OH	Zip Code 44137-1330	Transaction ID : VN7CZA6P9Z9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clement, Christina, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5130 Theodore St		Amount 34.20	
City Maple Heights	State OH	Zip Code 44137-1330	Transaction ID : VN7CZA6PCY8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clement, Christina, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5130 Theodore St		Amount 34.20	
City Maple Heights	State OH	Zip Code 44137-1330	Transaction ID : VN7CZA6PFX6
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Clement, Christina, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5130 Theodore St		Amount 34.20	
City Maple Heights	State OH	Zip Code 44137-1330	Transaction ID : VN7CZA6PJW4
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cloud, Taryn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 11541 Greenwood Ave N		Amount 68.40	
City Seattle	State WA	Zip Code 98133-8639	Transaction ID : VN7CZA6RA46
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cloud, Taryn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 11541 Greenwood Ave N		Amount 12.50	
City Seattle	State WA	Zip Code 98133-8639	Transaction ID : VN7CZA6RJR0
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.10
(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 Cobbs-Colquitt, Brianna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1024 N McKnight Rd		Amount 68.40	
City Saint Louis	State MO	Zip Code 63132-4020	Transaction ID : VN7CZA6RC16
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: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cole, Justin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1026 Clinard Ave		Amount 22.80	
City High Point	State NC	Zip Code 27265-3142	Transaction ID : VN7CZA6QY90
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cole, Justin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1026 Clinard Ave		Amount 22.80	
City High Point	State NC	Zip Code 27265-3142	Transaction ID : VN7CZA6QZH4
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(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 Cole, Justin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1026 Clinard Ave		Amount 22.80	
City High Point	State NC	Zip Code 27265-3142	Transaction ID : VN7CZA6R390
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cole, Justin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1026 Clinard Ave		Amount 22.80	
City High Point	State NC	Zip Code 27265-3142	Transaction ID : VN7CZA6R4H6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Coleman, Malcolm, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2050 Judith Pl		Amount 17.10	
City Longwood	State FL	Zip Code 32779-2780	Transaction ID : VN7CZA6Q172
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	62.70
(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 Coleman, Malcolm, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2050 Judith PI		Amount 17.10	
City Longwood	State FL	Zip Code 32779-2780	Transaction ID : VN7CZA6Q275
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: Ross, Deborah, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Coleman, Malcolm, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2050 Judith PI		Amount 17.10	
City Longwood	State FL	Zip Code 32779-2780	Transaction ID : VN7CZA6Q571
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: Clinton, Hillary, , ,		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 1672274.44			

Full Name (Last, First, Middle Initial) of Payee Coleman, Malcolm, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2050 Judith PI		Amount 17.10	
City Longwood	State FL	Zip Code 32779-2780	Transaction ID : VN7CZA6Q672
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: Trump, Donald, , ,		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 1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Coleman, Malcolm, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2050 Judith PI		Amount 3.13	
City Longwood	State FL	Zip Code 32779-2780	Transaction ID : VN7CZA6QCA9
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: Burr, Richard, , ,		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 Coleman, Malcolm, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2050 Judith PI		Amount 3.13	
City Longwood	State FL	Zip Code 32779-2780	Transaction ID : VN7CZA6QCR9
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: Ross, Deborah, , ,		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 Coleman, Malcolm, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2050 Judith PI		Amount 3.13	
City Longwood	State FL	Zip Code 32779-2780	Transaction ID : VN7CZA6QE21
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: Clinton, Hillary, , ,		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.....	9.39
(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 Coleman, Malcolm, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2050 Judith Pl		Amount 3.13	
City Longwood	State FL	Zip Code 32779-2780	
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: Trump, Donald, , ,		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 : VN7CZA6QEG2

Full Name (Last, First, Middle Initial) of Payee Collett, Austin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 : VN7CZA6PRB4

Full Name (Last, First, Middle Initial) of Payee Collett, Austin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 : VN7CZA6PSX7

(a) SUBTOTAL of Itemized Independent Expenditures.....	71.53
(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 Collett, Austin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PVF2
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Collett, Austin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PX15
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Collins-Muhammad, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4210 Fair Ave		Amount 77.20	
City Saint Louis	State MO	Zip Code 63115-3066	Transaction ID : VN7CZA6R9N8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	145.60
(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 Conway, Michael, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 115 Cecil St SE		Amount 6.25	
City Minneapolis	State MN	Zip Code 55414-3610	Transaction ID : VN7CZA6PZK1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Conway, Michael, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 115 Cecil St SE		Amount 6.25	
City Minneapolis	State MN	Zip Code 55414-3610	Transaction ID : VN7CZA6PZM9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Conway, Michael, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 115 Cecil St SE		Amount 6.25	
City Minneapolis	State MN	Zip Code 55414-3610	Transaction ID : VN7CZA6PZN7
Purpose of Expenditure Per Diem	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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Conway, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 115 Cecil St SE		Amount 6.25	
City Minneapolis	State MN	Zip Code 55414-3610	Transaction ID : VN7CZA6PZP5
Purpose of Expenditure Per Diem	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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cooper, Divine, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA6QY82
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cooper, Divine, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA6QZG6
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.85
(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 Cooper, Divine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA6R382
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cooper, Divine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA6R4G8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cooper, Nathalie, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA6QYF7
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 Cooper, Nathalie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA6QZQ1
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cooper, Nathalie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA6R3F7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cooper, Nathalie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA6R4Q3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Coplin, Terry, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4802 SW 134th Loop		Amount 68.40	
City Ocala	State FL	Zip Code 34473-5270	Transaction ID : VN7CZA6P2Y8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Coplin, Terry, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4802 SW 134th Loop		Amount 68.40	
City Ocala	State FL	Zip Code 34473-5270	Transaction ID : VN7CZA6P4D7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Corbin, Shaketra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 15815 Parkgrove Ave # DN		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-1417	Transaction ID : VN7CZA6PB18
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Corbin, Shaketra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 15815 Parkgrove Ave # DN		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-1417	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PE07
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 Corbin, Shaketra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 15815 Parkgrove Ave # DN		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-1417	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PGZ5
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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		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 Corbin, Shaketra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 15815 Parkgrove Ave # DN		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-1417	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PKY3
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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		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 Cortell, Aiden, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 33 Armstrong Rd Lwr		Amount 68.40	
City Lansing	State NY	Zip Code 14882-8909	Transaction ID : VN7CZA6NZV8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cortell, Aiden, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 33 Armstrong Rd Lwr		Amount 68.40	
City Lansing	State NY	Zip Code 14882-8909	Transaction ID : VN7CZA6P1F7
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cowan-Page, Isaac, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2130 Vantine St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15221-1138	Transaction ID : VN7CZA6NW58
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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 Cowan-Page, Isaac, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2130 Vantine St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15221-1138	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cox, Brittany, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cox, Brittany, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <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 Cox, Brittany, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PVG0
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cox, Brittany, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PX23
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Crawford, Keith, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4941 Catharine St		Amount 77.20	
City Philadelphia	State PA	Zip Code 19143-2007	Transaction ID : VN7CZA6NYY9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	145.60
(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 Crawford, Keith, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4941 Catharine St		Amount 77.20	
City Philadelphia	State PA	Zip Code 19143-2007	
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: McGinty, Kathleen, , ,		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)	
		2016	
		368876.35	

Transaction ID : VN7CZA6P0J8

Full Name (Last, First, Middle Initial) of Payee Crocker, Tonia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1821 W Ashdale St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19141-1006	
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: Clinton, Hillary, , ,		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)	
		2016	
		1672274.44	

Transaction ID : VN7CZA6NZG1

Full Name (Last, First, Middle Initial) of Payee Crocker, Tonia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1821 W Ashdale St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19141-1006	
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: McGinty, Kathleen, , ,		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)	
		2016	
		368876.35	

Transaction ID : VN7CZA6P140

(a) SUBTOTAL of Itemized Independent Expenditures.....	214.00
(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 Crow, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1100 Mediterranean Ave Apt 206		Amount 34.20	
City Columbus	State OH	Zip Code 43229-2500	Transaction ID : VN7CZA6NK91
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Crow, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1100 Mediterranean Ave Apt 206		Amount 34.20	
City Columbus	State OH	Zip Code 43229-2500	Transaction ID : VN7CZA6NMY7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Crow, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1100 Mediterranean Ave Apt 206		Amount 34.20	
City Columbus	State OH	Zip Code 43229-2500	Transaction ID : VN7CZA6NPK5
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Crow, Michael, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1100 Mediterranean Ave Apt 206		Amount 34.20	
City Columbus	State OH	Zip Code 43229-2500	Transaction ID : VN7CZA6NR82
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cruizers 20		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1914 Sedwick Rd		Amount 2.86	
City Durham	State NC	Zip Code 27713-9423	Transaction ID : VN7CZA6QSD0
Purpose of Expenditure Gas	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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cruizers 20		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1914 Sedwick Rd		Amount 2.86	
City Durham	State NC	Zip Code 27713-9423	Transaction ID : VN7CZA6QSY4
Purpose of Expenditure Gas	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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.92
(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 Cruizers 20		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1914 Sedwick Rd		Amount 2.86	
City Durham	State NC	Zip Code 27713-9423	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA6QVH5
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Cruizers 20		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1914 Sedwick Rd		Amount 2.86	
City Durham	State NC	Zip Code 27713-9423	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA6QW29
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Crump, Gary, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 26011 Lake Shore Blvd Apt 708		Amount 34.20	
City Euclid	State OH	Zip Code 44132-1118	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PAT3
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	▶	39.92
(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 Crump, Gary, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 26011 Lake Shore Blvd Apt 708		Amount 34.20	
City Euclid	State OH	Zip Code 44132-1118	Transaction ID : VN7CZA6PDS1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Crump, Gary, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 26011 Lake Shore Blvd Apt 708		Amount 34.20	
City Euclid	State OH	Zip Code 44132-1118	Transaction ID : VN7CZA6PGR0
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Crump, Gary, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 26011 Lake Shore Blvd Apt 708		Amount 34.20	
City Euclid	State OH	Zip Code 44132-1118	Transaction ID : VN7CZA6PKQ7
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Curet, Christopher, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1219 E Oxford St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19125-3922	Transaction ID : VN7CZA6NZN0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Curet, Christopher, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1219 E Oxford St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19125-3922	Transaction ID : VN7CZA6P199
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Currie, Timothy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12 Ivyglen Ct		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-9287	Transaction ID : VN7CZA6QYV0
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	159.60
(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 Currie, Timothy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12 Ivyglen Ct		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-9287	Transaction ID : VN7CZA6R036
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Currie, Timothy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12 Ivyglen Ct		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-9287	Transaction ID : VN7CZA6R3V2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Currie, Timothy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12 Ivyglen Ct		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-9287	Transaction ID : VN7CZA6R536
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 D, Datara, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 15603 School Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-3049	Transaction ID : VN7CZA6PBR0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee D, Datara, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 15603 School Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-3049	Transaction ID : VN7CZA6PEQ8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee D, Datara, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 15603 School Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-3049	Transaction ID : VN7CZA6PHP7
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 D, Datar, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 15603 School Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-3049	Transaction ID : VN7CZA6PMN4
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Dale, Paul, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 105 Newcastle Dr		Amount 68.40	
City Fairview Heights	State IL	Zip Code 62208-2651	Transaction ID : VN7CZA6R9S9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <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: Kander, Jason, , ,		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		81793.49	

Full Name (Last, First, Middle Initial) of Payee Davidson, Scott, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 10588 Septney Ave NW		Amount 34.20	
City Uniontown	State OH	Zip Code 44685	Transaction ID : VN7CZA6P998
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: Clinton, Hillary, , ,		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		1672274.44	

(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 Davidson, Scott, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 10588 Septney Ave NW		Amount 34.20	
City Uniontown	State OH	Zip Code 44685	Transaction ID : VN7CZA6PC86
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Davidson, Scott, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 10588 Septney Ave NW		Amount 34.20	
City Uniontown	State OH	Zip Code 44685	Transaction ID : VN7CZA6PF75
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Davidson, Scott, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 10588 Septney Ave NW		Amount 34.20	
City Uniontown	State OH	Zip Code 44685	Transaction ID : VN7CZA6PJ63
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Davis, Herman, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7339 Forrest Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Davis, Herman, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7339 Forrest Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dawson, Cory, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Dawson, Cory, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PC03

Full Name (Last, First, Middle Initial) of Payee Dawson, Cory, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PEZ1

Full Name (Last, First, Middle Initial) of Payee Dawson, Cory, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PHY0

(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 Dean, Miranda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 40 Rowland Ave		Amount 49.53	
City Delaware	State OH	Zip Code 43015-2313	Transaction ID : VN7CZA6NJ57
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dean, Miranda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 40 Rowland Ave		Amount 49.53	
City Delaware	State OH	Zip Code 43015-2313	Transaction ID : VN7CZA6NKT2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dean, Miranda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 40 Rowland Ave		Amount 49.53	
City Delaware	State OH	Zip Code 43015-2313	Transaction ID : VN7CZA6NNF1
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	148.59
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Dean, Miranda, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 40 Rowland Ave		Amount 49.53	
City Delaware	State OH	Zip Code 43015-2313	Transaction ID : VN7CZA6NQ48
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Debow, Joseph, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 471 Clearview Dr Apt 6		Amount 34.20	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA6P9M3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Debow, Joseph, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 471 Clearview Dr Apt 6		Amount 34.20	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA6PCK3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	117.93
(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 Debow, Joseph, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 471 Clearview Dr Apt 6		Amount 34.20	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA6PFJ2
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Debow, Joseph, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 471 Clearview Dr Apt 6		Amount 34.20	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA6PJH0
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dela Amekporfor		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3556 S Giles Ave		Amount 76.95	
City Chicago	State IL	Zip Code 60653-1156	Transaction ID : VN7CZA6NTM1
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: Kirk, Mark, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	145.35
(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 Dela Amekporfor		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3556 S Giles Ave		Amount 76.95	
City Chicago	State IL	Zip Code 60653-1156	Transaction ID : VN7CZA6NVC0
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: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Delgado, Gerardo, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 808 Ocean St Apt 1		Amount 34.20	
City Kissimmee	State FL	Zip Code 34744-2914	Transaction ID : VN7CZA6P3X1
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: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Delgado, Gerardo, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 808 Ocean St Apt 1		Amount 34.20	
City Kissimmee	State FL	Zip Code 34744-2914	Transaction ID : VN7CZA6P5C2
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: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	145.35
(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 Delgado, Gerardo, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 808 Ocean St Apt 1		Amount 34.20	
City Kissimmee	State FL	Zip Code 34744-2914	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6P634
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Delgado, Gerardo, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 808 Ocean St Apt 1		Amount 34.20	
City Kissimmee	State FL	Zip Code 34744-2914	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6P6P2
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Dennie, Laurel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5796 Shannon Place Ln		Amount 34.20	
City Dublin	State OH	Zip Code 43016-4199	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NJY4
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Dennie, Laurel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5796 Shannon Place Ln		Amount 34.20	
City Dublin	State OH	Zip Code 43016-4199	Transaction ID : VN7CZA6NMK0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dennie, Laurel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5796 Shannon Place Ln		Amount 34.20	
City Dublin	State OH	Zip Code 43016-4199	Transaction ID : VN7CZA6NP89
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dennie, Laurel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5796 Shannon Place Ln		Amount 34.20	
City Dublin	State OH	Zip Code 43016-4199	Transaction ID : VN7CZA6NQX5
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 DeVries, Keith, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5239 Stanton Ave		Amount 89.16	
City Pittsburgh	State PA	Zip Code 15201-2592	Transaction ID : VN7CZA6NWW1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee DeVries, Keith, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5239 Stanton Ave		Amount 89.16	
City Pittsburgh	State PA	Zip Code 15201-2592	Transaction ID : VN7CZA6NY02
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dey, Kinsley, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12 Wentworth Ave		Amount 5.34	
City Asheville	State NC	Zip Code 28803-9693	Transaction ID : VN7CZA6Q1P1
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	183.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Dey, Kinsley, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12 Wentworth Ave		Amount 5.34	
City Asheville	State NC	Zip Code 28803-9693	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6Q2P1
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09		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 Dey, Kinsley, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12 Wentworth Ave		Amount 5.34	
City Asheville	State NC	Zip Code 28803-9693	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6Q5P8
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Dey, Kinsley, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12 Wentworth Ave		Amount 5.34	
City Asheville	State NC	Zip Code 28803-9693	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6Q6P1
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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.....	16.02
(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 Diaz, Tabitha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6101 Metrowest Blvd Apt 103		Amount 34.20	
City Orlando	State FL	Zip Code 32835-2954	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6P2V4
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought 94857.42		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 Diaz, Tabitha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6101 Metrowest Blvd Apt 103		Amount 34.20	
City Orlando	State FL	Zip Code 32835-2954	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6P4A4
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought 94857.42		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 Diaz, Tabitha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6101 Metrowest Blvd Apt 103		Amount 34.20	
City Orlando	State FL	Zip Code 32835-2954	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6P5S5
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Diaz, Tabitha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 6101 Metrowest Blvd Apt 103		Amount 34.20	
City Orlando	State FL	Zip Code 32835-2954	Transaction ID : VN7CZA6P6C3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Diepenbrock, Eric, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 9429 Marlowe Ave		Amount 68.40	
City Overland	State MO	Zip Code 63114-3315	Transaction ID : VN7CZA6RBF4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Diloreto, Erika, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PQT0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	149.68
(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 Diloreto, Erika, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PSC3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Diloreto, Erika, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTY8
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Diloreto, Erika, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PWG1
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.24
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Dines, Madison, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 29.72	
City Milwaukie	State OR	Zip Code 97222-6184	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QZ67
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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 236458.09		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 Dines, Madison, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 29.72	
City Milwaukie	State OR	Zip Code 97222-6184	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6R0E3
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09		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 Dines, Madison, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 29.72	
City Milwaukie	State OR	Zip Code 97222-6184	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6R469
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	89.16
(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 Dines, Madison, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 29.72	
City Milwaukie	State OR	Zip Code 97222-6184	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dines, Madison, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 4.17	
City Milwaukie	State OR	Zip Code 97222-6184	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dines, Madison, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 4.17	
City Milwaukie	State OR	Zip Code 97222-6184	
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.06
(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 Dines, Madison, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 4.17	
City Milwaukie	State OR	Zip Code 97222-6184	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dines, Madison, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 4.17	
City Milwaukie	State OR	Zip Code 97222-6184	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dingle, Ebony, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 6145 Morton St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-1002	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.74
(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 Dingle, Ebony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6145 Morton St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-1002	Transaction ID : VN7CZA6P0Y2
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dobson, Reginald, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 140 Connolly Dr		Amount 91.91	
City Saint Louis	State MO	Zip Code 63135-1021	Transaction ID : VN7CZA6RBK5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dotson, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PRS5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	207.39
(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 Dotson, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTB8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dotson, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PVX3
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dotson, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PXF6
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.24
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Dryer, Jesse, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4531 SE Brookside Dr Apt 11		Amount 12.50	
City Milwaukie	State OR	Zip Code 97222-4162	Transaction ID : VN7CZA6RJT5
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Duncan, Darneka, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 6327 Washington Ave		Amount 68.40	
City Berkeley	State MO	Zip Code 63134-1723	Transaction ID : VN7CZA6RBN1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Duncan, Kevin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 105 S Watt St		Amount 34.20	
City Chillicothe	State OH	Zip Code 45601-3570	Transaction ID : VN7CZA6NJ65
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.10
(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 Duncan, Kevin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 105 S Watt St		Amount 34.20	
City Chillicothe	State OH	Zip Code 45601-3570	Transaction ID : VN7CZA6NKV0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Duncan, Kevin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 105 S Watt St		Amount 34.20	
City Chillicothe	State OH	Zip Code 45601-3570	Transaction ID : VN7CZA6NNG9
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Duncan, Kevin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 105 S Watt St		Amount 34.20	
City Chillicothe	State OH	Zip Code 45601-3570	Transaction ID : VN7CZA6NQ56
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Dunn, Seirra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4352 Schirmer St		Amount 68.40	
City Saint Louis	State MO	Zip Code 63116-2142	Transaction ID : VN7CZA6RAQ6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dunn, Theresa, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1377 Genessee Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43211-1434	Transaction ID : VN7CZA6N3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dunn, Theresa, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1377 Genessee Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43211-1434	Transaction ID : VN7CZA6NMA9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <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 Dunn, Theresa, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dunn, Theresa, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dycus, Michelle, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5779 Engel		Amount 34.20	
City Cleveland	State OH	Zip Code 44127	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Dycus, Michelle, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5779 Engel		Amount 34.20	
City Cleveland	State OH	Zip Code 44127	Transaction ID : VN7CZA6PDN0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dycus, Michelle, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5779 Engel		Amount 34.20	
City Cleveland	State OH	Zip Code 44127	Transaction ID : VN7CZA6PGM8
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dycus, Michelle, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5779 Engel		Amount 34.20	
City Cleveland	State OH	Zip Code 44127	Transaction ID : VN7CZA6PKK6
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Eachus, William, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 514 Brighton Rd		Amount 17.10	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA6QG74
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eachus, William, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 514 Brighton Rd		Amount 17.10	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA6QJ38
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eachus, William, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 514 Brighton Rd		Amount 17.10	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA6QNY5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Eachus, William, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 514 Brighton Rd		Amount 17.10	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA6QQ79
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Edward Johnson		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5640 S Wabash Ave Apt 2		Amount 76.95	
City Chicago	State IL	Zip Code 60637-1184	Transaction ID : VN7CZA6NTV6
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: Kirk, Mark, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		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 Edward Johnson		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5640 S Wabash Ave Apt 2		Amount 76.95	
City Chicago	State IL	Zip Code 60637-1184	Transaction ID : VN7CZA6NVK5
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: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Egbosimbah, Emmanuel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7601 Brentwood Rd		Amount 68.40	
City Philadelphia	State PA	Zip Code 19151-2022	
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: Clinton, Hillary, , ,		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 : VN7CZA6NZT0	

Full Name (Last, First, Middle Initial) of Payee Egbosimbah, Emmanuel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7601 Brentwood Rd		Amount 68.40	
City Philadelphia	State PA	Zip Code 19151-2022	
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: McGinty, Kathleen, , ,		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 : VN7CZA6P1E9	

Full Name (Last, First, Middle Initial) of Payee Ehrlich, Jacob, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 406 Kent Dr		Amount 17.10	
City Cary	State NC	Zip Code 27511-3105	
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: Burr, Richard, , ,		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 : VN7CZA6Q0S1	

(a) SUBTOTAL of Itemized Independent Expenditures.....	153.90
(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 Ehrlich, Jacob, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 406 Kent Dr		Amount 17.10	
City Cary	State NC	Zip Code 27511-3105	Transaction ID : VN7CZA6Q1S4
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: Ross, Deborah, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Ehrlich, Jacob, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 406 Kent Dr		Amount 17.10	
City Cary	State NC	Zip Code 27511-3105	Transaction ID : VN7CZA6Q4S1
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Ehrlich, Jacob, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 406 Kent Dr		Amount 17.10	
City Cary	State NC	Zip Code 27511-3105	Transaction ID : VN7CZA6Q5S1
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: Trump, Donald, , ,		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		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee El Hamawi, Abdallah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 94.11	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA6P345
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee El Hamawi, Abdallah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 94.11	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA6P4K5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee El Hamawi, Youssef, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 94.11	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA6P3Z7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	282.33
(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 El Hamawi, Youssef, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 94.11	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA6P5E8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee El, Mulai, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3510 Mantua Avwe		Amount 68.40	
City Philadelphia	State PA	Zip Code 19104	Transaction ID : VN7CZA6NYP6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee El, Mulai, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3510 Mantua Avwe		Amount 68.40	
City Philadelphia	State PA	Zip Code 19104	Transaction ID : VN7CZA6P0A4
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	230.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Elkinton, Sarah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3220 SE 92nd Ave Apt 41		Amount 68.40	
City Portland	State OR	Zip Code 97266-1963	Transaction ID : VN7CZA6RA54
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elkinton, Sarah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3220 SE 92nd Ave Apt 41		Amount 12.50	
City Portland	State OR	Zip Code 97266-1963	Transaction ID : VN7CZA6RJS7
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ellis, Wesley, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PRZ2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.10
(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 Ellis, Wesley, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 : VN7CZA6PTH5
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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)
1672274.44		2016	

Full Name (Last, First, Middle Initial) of Payee Ellis, Wesley, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 : VN7CZA6PW30
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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		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)
897326.39		2016	

Full Name (Last, First, Middle Initial) of Payee Ellis, Wesley, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 : VN7CZA6PXN3
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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		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)
897326.39		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 Engstrom, Rachel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4223 Virginia Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1913	Transaction ID : VN7CZA6PRV1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Engstrom, Rachel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4223 Virginia Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1913	Transaction ID : VN7CZA6PTD4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Engstrom, Rachel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4223 Virginia Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1913	Transaction ID : VN7CZA6PVZ9
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Engstrom, Rachel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4223 Virginia Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1913	Transaction ID : VN7CZA6PXH2
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 10 / 28 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 76.95	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA6NTF1
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: Kirk, Mark, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		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 10 / 28 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 76.95	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA6NV71
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: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	188.10
(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 Eure, Elizabeth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 72982		Amount 5.34	
City North Chesterfield	State VA	Zip Code 23235-8023	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QHS9
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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 236458.09		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 Eure, Elizabeth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 72982		Amount 5.34	
City North Chesterfield	State VA	Zip Code 23235-8023	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QK20
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09		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 Eure, Elizabeth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 72982		Amount 5.34	
City North Chesterfield	State VA	Zip Code 23235-8023	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QPX0
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	16.02
(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 Eure, Elizabeth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 72982		Amount 5.34	
City North Chesterfield	State VA	Zip Code 23235-8023	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QR64

Full Name (Last, First, Middle Initial) of Payee Euype, Kyle, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1222 W Clifton Blvd		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1053	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P9Q6

Full Name (Last, First, Middle Initial) of Payee Euype, Kyle, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1222 W Clifton Blvd		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1053	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PCP5

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.74
(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 Euype, Kyle, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1222 W Clifton Blvd		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1053	Transaction ID : VN7CZA6PFN5
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Euype, Kyle, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1222 W Clifton Blvd		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-1053	Transaction ID : VN7CZA6PJM4
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Extended Stay America-Bridgeton		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 11252 Lone Eagle Dr		Amount 30.40	
City Bridgeton	State MO	Zip Code 63044-2739	Transaction ID : VN7CZA6RFT0
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	98.80
(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 Extended Stay America-Bridgeton		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 11252 Lone Eagle Dr		Amount 30.40	
City Bridgeton	State MO	Zip Code 63044-2739	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA6RFV8
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: MO 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 Extended Stay America-Bridgeton		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 11252 Lone Eagle Dr		Amount 36.76	
City Bridgeton	State MO	Zip Code 63044-2739	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA6RG31
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: MO 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 Extended Stay America-Bridgeton		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 11252 Lone Eagle Dr		Amount 39.65	
City Bridgeton	State MO	Zip Code 63044-2739	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA6RG49
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: MO 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.....	106.81
(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 Extended Stay America-Bridgeton		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 11252 Lone Eagle Dr		Amount 39.65	
City Bridgeton	State MO	Zip Code 63044-2739	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA6RG57
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input type="checkbox"/> House State: MO <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 2016 <input type="checkbox"/> Other (specify)	
		81793.49	

Full Name (Last, First, Middle Initial) of Payee Extended Stay America-Bridgeton		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 11252 Lone Eagle Dr		Amount 39.65	
City Bridgeton	State MO	Zip Code 63044-2739	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA6RG65
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input type="checkbox"/> House State: MO <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 2016 <input type="checkbox"/> Other (specify)	
		81793.49	

Full Name (Last, First, Middle Initial) of Payee Extended Stay America-Bridgeton		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 11252 Lone Eagle Dr		Amount 39.65	
City Bridgeton	State MO	Zip Code 63044-2739	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA6RG73
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input type="checkbox"/> House State: MO <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 2016 <input type="checkbox"/> Other (specify)	
		81793.49	

(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 Extended Stay America-Covington		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 650 W 3rd St		Amount 25.65	
City Covington	State KY	Zip Code 41011-1204	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA6PYA9
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Extended Stay America-Covington		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 650 W 3rd St		Amount 25.65	
City Covington	State KY	Zip Code 41011-1204	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA6PYQ2
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Extended Stay America-Covington		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 650 W 3rd St		Amount 25.65	
City Covington	State KY	Zip Code 41011-1204	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA6PZ45
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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.....	76.95
(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 Extended Stay America-Covington		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 650 W 3rd St		Amount 25.65	
City Covington	State KY	Zip Code 41011-1204	
Purpose of Expenditure Lodging	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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eyajan, Sheila, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10106 Station Rd		Amount 34.20	
City North East	State PA	Zip Code 16428-5704	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eyajan, Sheila, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10106 Station Rd		Amount 34.20	
City North East	State PA	Zip Code 16428-5704	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	94.05
(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 Eyajan, Sheila, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10106 Station Rd		Amount 34.20	
City North East	State PA	Zip Code 16428-5704	Transaction ID : VN7CZA6PHH7
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eyajan, Sheila, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10106 Station Rd		Amount 34.20	
City North East	State PA	Zip Code 16428-5704	Transaction ID : VN7CZA6PMG5
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Faessler, Kollin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5926 Mausser Dr		Amount 89.16	
City Orlando	State FL	Zip Code 32822-2922	Transaction ID : VN7CZA6RC58
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	157.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 10 / 28 / 2016	
Mailing Address 5926 Mausser Dr		Amount 12.50	
City Orlando	State FL	Zip Code 32822-2922	Transaction ID : VN7CZA6RJF8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <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: Kander, Jason, , ,		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		81793.49	

Full Name (Last, First, Middle Initial) of Payee Faison, James, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2010 W Indiana Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-1522	Transaction ID : VN7CZA6NZX4
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Faison, James, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2010 W Indiana Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-1522	Transaction ID : VN7CZA6P1H2
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: McGinty, Kathleen, , ,		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		368876.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	149.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Felton, Julian, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 761 Davies Ave		Amount 34.20	
City Akron	State OH	Zip Code 44306-2703	Transaction ID : VN7CZA6PA98
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Felton, Julian, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 761 Davies Ave		Amount 34.20	
City Akron	State OH	Zip Code 44306-2703	Transaction ID : VN7CZA6PD87
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: Trump, Donald, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Felton, Julian, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 761 Davies Ave		Amount 34.20	
City Akron	State OH	Zip Code 44306-2703	Transaction ID : VN7CZA6PG75
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: Portman, Rob, , ,		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		897326.39	

(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 Felton, Julian, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 761 Davies Ave		Amount 34.20	
City Akron	State OH	Zip Code 44306-2703	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PK63

Full Name (Last, First, Middle Initial) of Payee Fennell, Shawn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1512 Superior Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-2726	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NWD1

Full Name (Last, First, Middle Initial) of Payee Fennell, Shawn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1512 Superior Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-2726	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NXJ1

(a) **SUBTOTAL** of Itemized Independent Expenditures..... 171.00

(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 Ferguson, Antoine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5080 Lee Rd Apt 2		Amount 34.20	
City Maple Heights	State OH	Zip Code 44137-1257	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6P9X4
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Ferguson, Antoine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5080 Lee Rd Apt 2		Amount 34.20	
City Maple Heights	State OH	Zip Code 44137-1257	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PCW2
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Ferguson, Antoine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5080 Lee Rd Apt 2		Amount 34.20	
City Maple Heights	State OH	Zip Code 44137-1257	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PFV1
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Ferguson, Antoine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5080 Lee Rd Apt 2		Amount 34.20	
City Maple Heights	State OH	Zip Code 44137-1257	Transaction ID : VN7CZA6PJT1
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Fields, Waleed, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 956 Hamilton Ave		Amount 68.40	
City Saint Louis	State MO	Zip Code 63112-2461	Transaction ID : VN7CZA6RAA4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Filippelli, Paul, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2448 Ravenel Dr		Amount 38.60	
City Columbus	State OH	Zip Code 43209-3307	Transaction ID : VN7CZA6NJ98
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.20
(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 Filippelli, Paul, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2448 Ravenel Dr		Amount 38.60	
City Columbus	State OH	Zip Code 43209-3307	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NKY4

Full Name (Last, First, Middle Initial) of Payee Filippelli, Paul, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2448 Ravenel Dr		Amount 38.60	
City Columbus	State OH	Zip Code 43209-3307	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NNK3

Full Name (Last, First, Middle Initial) of Payee Filippelli, Paul, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2448 Ravenel Dr		Amount 38.60	
City Columbus	State OH	Zip Code 43209-3307	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NQ89

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.80
(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 Finn, John, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1518 Oakwood Dr		Amount 89.16	
City Pittsburgh	State PA	Zip Code 15234-1012	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NWJ0
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Finn, John, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1518 Oakwood Dr		Amount 89.16	
City Pittsburgh	State PA	Zip Code 15234-1012	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NXQ1
Name of Federal Candidate Supported or Opposed by Expenditure: McGinty, Kathleen, , ,		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: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
		368876.35	

Full Name (Last, First, Middle Initial) of Payee Fitz, Hannah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PRJ0
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		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) ▶
		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	224.28
(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 Fitz, Hannah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PT43
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: Trump, Donald, , ,		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	
1672274.44			

Full Name (Last, First, Middle Initial) of Payee Fitz, Hannah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PVP8
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: Portman, Rob, , ,		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	
897326.39			

Full Name (Last, First, Middle Initial) of Payee Fitz, Hannah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PX81
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: Strickland, Ted, , ,		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)	
		2016	
897326.39			

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	137.88
(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 Flemings, Tara, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3478 We Ave		Amount 68.40	
City Saint Ann	State MO	Zip Code 63074-3326	Transaction ID : VN7CZA6RCG5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Fraizer, Erica, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5360 Bartmer Ave		Amount 68.40	
City Saint Louis	State MO	Zip Code 63112-3403	Transaction ID : VN7CZA6RAJ7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Franklin, Robert, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1923 W 48th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3436	Transaction ID : VN7CZA6PA31
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Franklin, Robert, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1923 W 48th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3436	Transaction ID : VN7CZA6PD20
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Franklin, Robert, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1923 W 48th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3436	Transaction ID : VN7CZA6PG18
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Franklin, Robert, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1923 W 48th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3436	Transaction ID : VN7CZA6PK06
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Fredman, Joshua, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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	Transaction ID : VN7CZA6R8N5
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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		236458.09	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 Fredman, Joshua, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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	Transaction ID : VN7CZA6R8T4
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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		236458.09	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 Fredman, Joshua, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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	Transaction ID : VN7CZA6R993
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		1672274.44	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.....	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 Fredman, Joshua, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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	Transaction ID : VN7CZA6R9E2
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Fried, David, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 21964 River Oaks Dr		Amount 34.20	
City Rocky River	State OH	Zip Code 44116-3113	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PAY4
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Fried, David, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 21964 River Oaks Dr		Amount 34.20	
City Rocky River	State OH	Zip Code 44116-3113	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PDX3
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Fried, David, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 21964 River Oaks Dr		Amount 34.20	
City Rocky River	State OH	Zip Code 44116-3113	Transaction ID : VN7CZA6PGW1
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Fried, David, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 21964 River Oaks Dr		Amount 34.20	
City Rocky River	State OH	Zip Code 44116-3113	Transaction ID : VN7CZA6PKV9
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Fuentes, Tahira, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 26.42	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA6QZ41
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	94.82
(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 Fuentes, Tahira, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 26.42	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA6R0C7
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Fuentes, Tahira, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 26.42	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA6R443
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Fuentes, Tahira, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 26.42	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA6R5C7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.26
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Gadson, Latondia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PRF6
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		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) ▶
		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Gadson, Latondia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PT19
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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		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) ▶
		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Gadson, Latondia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PVK4
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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		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) ▶
		897326.39	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	137.88
(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 Gadson, Latondia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PX57
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Galensky, Kari, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 228 N Graham St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15206-2832	Transaction ID : VN7CZA6NWT4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Galensky, Kari, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 228 N Graham St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15206-2832	Transaction ID : VN7CZA6NXZ4
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	182.76
(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 Galicia, Gershon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 13102 NE 132nd St		Amount 12.50	
City Kirkland	State WA	Zip Code 98034-2306	Transaction ID : VN7CZA6RJX9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Garcia, Mitchell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 744 Chestershire Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43204-2324	Transaction ID : VN7CZA6NJR7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Garcia, Mitchell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 744 Chestershire Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43204-2324	Transaction ID : VN7CZA6NMD2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	80.90
(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 Garcia, Mitchell, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 744 Chestershire Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43204-2324	
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: Portman, Rob, , ,		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 : VN7CZA6NP21	

Full Name (Last, First, Middle Initial) of Payee Garcia, Mitchell, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 744 Chestershire Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43204-2324	
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: Strickland, Ted, , ,		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 : VN7CZA6NQQ8	

Full Name (Last, First, Middle Initial) of Payee Garrett, Deanna, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 47.08	
City Fort Thomas	State KY	Zip Code 41075-2520	
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: Clinton, Hillary, , ,		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 : VN7CZA6PQS2	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.48
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Garrett, Deanna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 47.08	
City Fort Thomas	State KY	Zip Code 41075-2520	Transaction ID : VN7CZA6PSB5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Garrett, Deanna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 47.08	
City Fort Thomas	State KY	Zip Code 41075-2520	Transaction ID : VN7CZA6PTX0
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Garrett, Deanna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 47.08	
City Fort Thomas	State KY	Zip Code 41075-2520	Transaction ID : VN7CZA6PWF3
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.24
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Garrett, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA6PQW6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Garrett, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA6PSE9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Garrett, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA6PV04
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Garrett, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 34.20	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA6PWJ7
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ge'ylah Jones		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 11344 S Forest Ave		Amount 91.91	
City Chicago	State IL	Zip Code 60628-5023	Transaction ID : VN7CZA6NTP6
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: Kirk, Mark, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ge'ylah Jones		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 11344 S Forest Ave		Amount 91.91	
City Chicago	State IL	Zip Code 60628-5023	Transaction ID : VN7CZA6NVE6
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: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	218.02
(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 Gholston, Clyrena, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 471 Clearview Dr Apt J		Amount 34.20	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA6PBE1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary 2016 <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gholston, Clyrena, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 471 Clearview Dr Apt J		Amount 34.20	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA6PED9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary 2016 <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gholston, Clyrena, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 471 Clearview Dr Apt J		Amount 34.20	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA6PHC8
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary 2016 <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 Gholston, Clyrena, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 471 Clearview Dr Apt J		Amount 34.20	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA6PMB5
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Gibbs, Alexis, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1869 Windermere St		Amount 34.20	
City Cleveland	State OH	Zip Code 44112-3903	Transaction ID : VN7CZA6PB34
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Gibbs, Alexis, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1869 Windermere St		Amount 34.20	
City Cleveland	State OH	Zip Code 44112-3903	Transaction ID : VN7CZA6PE22
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: Trump, Donald, , ,		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		1672274.44	

(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 Gibbs, Alexis, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1869 Windermere St		Amount 34.20	
City Cleveland	State OH	Zip Code 44112-3903	
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: Portman, Rob, , ,		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)	
		897326.39	

Transaction ID : VN7CZA6PH11

Full Name (Last, First, Middle Initial) of Payee Gibbs, Alexis, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1869 Windermere St		Amount 34.20	
City Cleveland	State OH	Zip Code 44112-3903	
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: Strickland, Ted, , ,		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)	
		897326.39	

Transaction ID : VN7CZA6PM08

Full Name (Last, First, Middle Initial) of Payee Gilliam Bowers, Dyanna, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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: Clinton, Hillary, , ,		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)	
		1672274.44	

Transaction ID : VN7CZA6PRN3

(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 Gilliam Bowers, Dyanna, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PT76
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gilliam Bowers, Dyanna, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PVS1
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gilliam Bowers, Dyanna, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PXB4
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Gilmer, Detiste, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 115 McCormick St.		Amount 33.02	
City Greensboro	State NC	Zip Code 27403	Transaction ID : VN7CZA6QZ59
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gilmer, Detiste, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 115 McCormick St.		Amount 33.02	
City Greensboro	State NC	Zip Code 27403	Transaction ID : VN7CZA6R0D5
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gilmer, Detiste, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 115 McCormick St.		Amount 33.02	
City Greensboro	State NC	Zip Code 27403	Transaction ID : VN7CZA6R451
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(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 Gilmer, Detiste, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 115 McCormick St.		Amount 33.02	
City Greensboro	State NC	Zip Code 27403	Transaction ID : VN7CZA6R5D5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gittens, Keisan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 415 S 42nd St Apt 11		Amount 68.40	
City Philadelphia	State PA	Zip Code 19104-4094	Transaction ID : VN7CZA6NZR4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gittens, Keisan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 415 S 42nd St Apt 11		Amount 68.40	
City Philadelphia	State PA	Zip Code 19104-4094	Transaction ID : VN7CZA6P1C3
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	169.82
(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 Gladden, Tyra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2340 Booker St		Amount 22.80	
City Winston Salem	State NC	Zip Code 27105-5604	Transaction ID : VN7CZA6QZB7
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: Burr, Richard, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Gladden, Tyra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2340 Booker St		Amount 22.80	
City Winston Salem	State NC	Zip Code 27105-5604	Transaction ID : VN7CZA6R0K3
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: Ross, Deborah, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Gladden, Tyra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2340 Booker St		Amount 22.80	
City Winston Salem	State NC	Zip Code 27105-5604	Transaction ID : VN7CZA6R4B9
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: Clinton, Hillary, , ,		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 1672274.44			

(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 Gladden, Tyra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2340 Booker St		Amount 22.80	
City Winston Salem	State NC	Zip Code 27105-5604	Transaction ID : VN7CZA6R5K3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gobert, Cynthia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3243 Welsberg Dr		Amount 68.40	
City Saint Louis	State MO	Zip Code 63121-4101	Transaction ID : VN7CZA6RAS2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Goins, Aqueelah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1647 Elsinore Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44112-3815	Transaction ID : VN7CZA6P9C1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	125.40
(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 Goins, Aqueelah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1647 Elsinore Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44112-3815	Transaction ID : VN7CZA6PCB0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Goins, Aqueelah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1647 Elsinore Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44112-3815	Transaction ID : VN7CZA6PFA8
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Goins, Aqueelah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1647 Elsinore Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44112-3815	Transaction ID : VN7CZA6PJ97
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Gomera, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12127 Green Badger Ln		Amount 34.20	
City Orlando	State FL	Zip Code 32817-3564	Transaction ID : VN7CZA6P3S9
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: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gomera, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12127 Green Badger Ln		Amount 34.20	
City Orlando	State FL	Zip Code 32817-3564	Transaction ID : VN7CZA6P581
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: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gomera, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12127 Green Badger Ln		Amount 34.20	
City Orlando	State FL	Zip Code 32817-3564	Transaction ID : VN7CZA6P626
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Gomera, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12127 Green Badger Ln		Amount 34.20	
City Orlando	State FL	Zip Code 32817-3564	Transaction ID : VN7CZA6P6N4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Goode, Kelvonna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 734 Eddy Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-2367	Transaction ID : VN7CZA6PAR7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Goode, Kelvonna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 734 Eddy Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-2367	Transaction ID : VN7CZA6PDQ5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Goode, Kelvonna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 734 Eddy Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-2367	Transaction ID : VN7CZA6PGP4
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Goode, Kelvonna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 734 Eddy Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-2367	Transaction ID : VN7CZA6PKN1
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Goodlow, Jamal, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5005 Rainmaker Dr		Amount 5.34	
City Durham	State NC	Zip Code 27704-2299	Transaction ID : VN7CZA6QHT7
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.74
(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 Goodlow, Jamal, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5005 Rainmaker Dr		Amount 5.34	
City Durham	State NC	Zip Code 27704-2299	Transaction ID : VN7CZA6QK38
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Goodlow, Jamal, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5005 Rainmaker Dr		Amount 5.34	
City Durham	State NC	Zip Code 27704-2299	Transaction ID : VN7CZA6QPY8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Goodlow, Jamal, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5005 Rainmaker Dr		Amount 5.34	
City Durham	State NC	Zip Code 27704-2299	Transaction ID : VN7CZA6QR71
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.02
(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 Goodlow-Harris, Cherica, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 509 N Hardee St		Amount 17.10	
City Durham	State NC	Zip Code 27703-1507	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QHV5
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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 236458.09		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 Goodlow-Harris, Cherica, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 509 N Hardee St		Amount 17.10	
City Durham	State NC	Zip Code 27703-1507	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QK46
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09		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 Goodlow-Harris, Cherica, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 509 N Hardee St		Amount 17.10	
City Durham	State NC	Zip Code 27703-1507	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QPZ5
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Goodlow-Harris, Cherica, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 509 N Hardee St		Amount 17.10	
City Durham	State NC	Zip Code 27703-1507	Transaction ID : VN7CZA6QR89
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gordon, Jameka, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5011 Catharine St Apt 2		Amount 68.40	
City Philadelphia	State PA	Zip Code 19143-1627	Transaction ID : VN7CZA6NZH9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gordon, Jameka, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5011 Catharine St Apt 2		Amount 68.40	
City Philadelphia	State PA	Zip Code 19143-1627	Transaction ID : VN7CZA6P158
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	153.90
(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 Gore, Josh, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2809 Pine Lake Dr		Amount 29.72	
City Greensboro	State NC	Zip Code 27407-6813	Transaction ID : VN7CZA6QYP1
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gore, Josh, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2809 Pine Lake Dr		Amount 29.72	
City Greensboro	State NC	Zip Code 27407-6813	Transaction ID : VN7CZA6QZY7
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gore, Josh, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2809 Pine Lake Dr		Amount 29.72	
City Greensboro	State NC	Zip Code 27407-6813	Transaction ID : VN7CZA6R3P3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	89.16
(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 Gore, Josh, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2809 Pine Lake Dr		Amount 29.72	
City Greensboro	State NC	Zip Code 27407-6813	Transaction ID : VN7CZA6R4Y7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Govan, Kayla, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 81 Vanmark Way		Amount 68.40	
City Brentwood	State MO	Zip Code 63144-2426	Transaction ID : VN7CZA6RB55
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Grant, Angela, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 39 Jill Ct		Amount 68.40	
City Wilmington	State DE	Zip Code 19809-1450	Transaction ID : VN7CZA6NZ54
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	166.52
(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 Grant, Angela, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 39 Jill Ct		Amount 68.40	
City Wilmington	State DE	Zip Code 19809-1450	
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: McGinty, Kathleen, , ,		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 2016 <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA6P0S3	

Full Name (Last, First, Middle Initial) of Payee Grasso, Michelle, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 9852 Winnington st.		Amount 21.38	
City Orlando	State FL	Zip Code 32832	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		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 2016 <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA6P454	

Full Name (Last, First, Middle Initial) of Payee Grasso, Michelle, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 9852 Winnington st.		Amount 21.38	
City Orlando	State FL	Zip Code 32832	
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
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 2016 <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA6P5M5	

(a) SUBTOTAL of Itemized Independent Expenditures.....	111.16
(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 Gray, Ezra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1814 Brisbane St		Amount 68.40	
City Silver Spring	State MD	Zip Code 20902-4018	Transaction ID : VN7CZA6NYZ7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gray, Ezra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1814 Brisbane St		Amount 68.40	
City Silver Spring	State MD	Zip Code 20902-4018	Transaction ID : VN7CZA6P0K5
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Green, Racheal, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 527 N Negley Ave Apt 3		Amount 89.16	
City Pittsburgh	State PA	Zip Code 15206-2445	Transaction ID : VN7CZA6NW08
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	225.96
(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 Green, Racheal, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 527 N Negley Ave Apt 3		Amount 89.16	
City Pittsburgh	State PA	Zip Code 15206-2445	Transaction ID : VN7CZA6NX58
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: McGinty, Kathleen, , ,		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		368876.35	

Full Name (Last, First, Middle Initial) of Payee Greene, Rose, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 417 Moline St		Amount 24.77	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA6QGR8
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: Burr, Richard, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Greene, Rose, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 417 Moline St		Amount 24.77	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA6QJ12
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: Ross, Deborah, , ,		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		236458.09	

(a) SUBTOTAL of Itemized Independent Expenditures.....	138.70
(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 Greene, Rose, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 417 Moline St		Amount 24.77	
City Durham	State NC	Zip Code 27707-2347	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QNW9
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Greene, Rose, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 417 Moline St		Amount 24.77	
City Durham	State NC	Zip Code 27707-2347	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QQ53
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Greene, William, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 36 E Montana St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-2210	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NYQ3
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....▶	117.94
(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 Greene, William, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 36 E Montana St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-2210	Transaction ID : VN7CZA6P0B2
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: McGinty, Kathleen, , ,		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		368876.35	

Full Name (Last, First, Middle Initial) of Payee Greer, George, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1303 201st St SW		Amount 17.10	
City Lynnwood	State WA	Zip Code 98036-7150	Transaction ID : VN7CZA6Q180
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: Burr, Richard, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Greer, George, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1303 201st St SW		Amount 17.10	
City Lynnwood	State WA	Zip Code 98036-7150	Transaction ID : VN7CZA6Q283
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: Ross, Deborah, , ,		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		236458.09	

(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 Greer, George, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1303 201st St SW		Amount 17.10	
City Lynnwood	State WA	Zip Code 98036-7150	Transaction ID : VN7CZA6Q589
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Greer, George, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1303 201st St SW		Amount 17.10	
City Lynnwood	State WA	Zip Code 98036-7150	Transaction ID : VN7CZA6Q680
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Greer, George, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1303 201st St SW		Amount 3.13	
City Lynnwood	State WA	Zip Code 98036-7150	Transaction ID : VN7CZA6QC91
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.33
(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 Greer, George, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1303 201st St SW		Amount 3.13	
City Lynnwood	State WA	Zip Code 98036-7150	Transaction ID : VN7CZA6QCQ1
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Greer, George, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1303 201st St SW		Amount 3.13	
City Lynnwood	State WA	Zip Code 98036-7150	Transaction ID : VN7CZA6QE13
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Greer, George, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1303 201st St SW		Amount 3.13	
City Lynnwood	State WA	Zip Code 98036-7150	Transaction ID : VN7CZA6QEF4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.39
(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 Gridin, Nikita, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12127 Waterstone Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32825-7029	Transaction ID : VN7CZA6P337
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gridin, Nikita, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12127 Waterstone Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32825-7029	Transaction ID : VN7CZA6P4J7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gridin, Nikita, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12127 Waterstone Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32825-7029	Transaction ID : VN7CZA6P5V1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Gridin, Nikita, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12127 Waterstone Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32825-7029	Transaction ID : VN7CZA6P6E9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Griffin, Joshua, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PRG4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Griffin, Joshua, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PT27
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	126.12
(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 Griffin, Joshua, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Griffin, Joshua, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Griffith, John, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5389 Shannon Ln		Amount 34.20	
City Columbus	State OH	Zip Code 43235-7294	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	126.12
(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 Griffith, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5389 Shannon Ln		Amount 34.20	
City Columbus	State OH	Zip Code 43235-7294	Transaction ID : VN7CZA6NM75
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Griffith, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5389 Shannon Ln		Amount 34.20	
City Columbus	State OH	Zip Code 43235-7294	Transaction ID : VN7CZA6NNW4
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Griffith, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5389 Shannon Ln		Amount 34.20	
City Columbus	State OH	Zip Code 43235-7294	Transaction ID : VN7CZA6NQH0
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Grimes, Dominique, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1700 Lake Front Dr Apt E		Amount 17.10	
City Raleigh	State NC	Zip Code 27613-3471	Transaction ID : VN7CZA6Q1H1
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Grimes, Dominique, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1700 Lake Front Dr Apt E		Amount 17.10	
City Raleigh	State NC	Zip Code 27613-3471	Transaction ID : VN7CZA6Q2H2
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Grimes, Dominique, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1700 Lake Front Dr Apt E		Amount 17.10	
City Raleigh	State NC	Zip Code 27613-3471	Transaction ID : VN7CZA6Q5H0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Grimes, Dominique, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1700 Lake Front Dr Apt E		Amount 17.10	
City Raleigh	State NC	Zip Code 27613-3471	Transaction ID : VN7CZA6Q6H1
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: Trump, Donald, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Haffling, Ian, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 917 McCandless Ave		Amount 89.16	
City Pittsburgh	State PA	Zip Code 15201-2451	Transaction ID : VN7CZA6NWK8
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Haffling, Ian, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 917 McCandless Ave		Amount 89.16	
City Pittsburgh	State PA	Zip Code 15201-2451	Transaction ID : VN7CZA6NXR9
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: McGinty, Kathleen, , ,		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		368876.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	195.42
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Hafford, Allen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PRT3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hafford, Allen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTC6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hafford, Allen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PVY1
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.24
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Hafford, Allen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PXG4
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haines, Jacob, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PS26
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haines, Jacob, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTM9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	139.00
(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 Haines, Jacob, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haines, Jacob, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haines, Jonathan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 24.77	
City Minneapolis	State MN	Zip Code 55407-1716	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	116.69
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Haines, Jonathan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 24.77	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA6Q1V0
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haines, Jonathan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 24.77	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA6Q4V6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haines, Jonathan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 24.77	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA6Q5V7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.31
(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 Haines, Jonathan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 3.13	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA6QC17
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haines, Jonathan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 3.13	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA6QCF8
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haines, Jonathan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 3.13	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA6QDS0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.39
(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 Haines, Jonathan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 3.13	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA6QE70
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hamdan, Ahmad, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2006 Lowrie St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-3227	Transaction ID : VN7CZA6NWH2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hamdan, Ahmad, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2006 Lowrie St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-3227	Transaction ID : VN7CZA6NXP3
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	139.93
(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 Hamilton, Maurice, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3241 Rowena Ave		Amount 17.10	
City Durham	State NC	Zip Code 27703-4448	Transaction ID : VN7CZA6QGZ4
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hamilton, Maurice, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3241 Rowena Ave		Amount 17.10	
City Durham	State NC	Zip Code 27703-4448	Transaction ID : VN7CZA6QJ85
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hamilton, Maurice, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3241 Rowena Ave		Amount 17.10	
City Durham	State NC	Zip Code 27703-4448	Transaction ID : VN7CZA6QP34
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Hamilton, Maurice, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3241 Rowena Ave		Amount 17.10	
City Durham	State NC	Zip Code 27703-4448	Transaction ID : VN7CZA6QQC8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hammond, Theophilus, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12044 El Greco Ct		Amount 68.40	
City Saint Louis	State MO	Zip Code 63138-1828	Transaction ID : VN7CZA6RAX4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Handsom, Corey, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4967 Avenida Del Sol Dr		Amount 17.10	
City Raleigh	State NC	Zip Code 27616-4566	Transaction ID : VN7CZA6Q1D9
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 Handsom, Corey, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4967 Avenida Del Sol Dr		Amount 17.10	
City Raleigh	State NC	Zip Code 27616-4566	Transaction ID : VN7CZA6Q2D2
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: Ross, Deborah, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Handsom, Corey, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4967 Avenida Del Sol Dr		Amount 17.10	
City Raleigh	State NC	Zip Code 27616-4566	Transaction ID : VN7CZA6Q5D9
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: Clinton, Hillary, , ,		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 1672274.44			

Full Name (Last, First, Middle Initial) of Payee Handsom, Corey, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4967 Avenida Del Sol Dr		Amount 17.10	
City Raleigh	State NC	Zip Code 27616-4566	Transaction ID : VN7CZA6Q6D9
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: Trump, Donald, , ,		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 1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Hane, Margaret, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 89.16	
City Pittsburgh	State PA	Zip Code 15224-1953	Transaction ID : VN7CZA6NWC3
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Hane, Margaret, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 89.16	
City Pittsburgh	State PA	Zip Code 15224-1953	Transaction ID : VN7CZA6NXH3
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: McGinty, Kathleen, , ,		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		368876.35	

Full Name (Last, First, Middle Initial) of Payee Hanratty, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 15014 London Rd		Amount 68.40	
City Philadelphia	State PA	Zip Code 19116-1517	Transaction ID : VN7CZA6NZE5
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: Clinton, Hillary, , ,		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		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	246.72
(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 Hanratty, John, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 15014 London Rd		Amount 68.40	
City Philadelphia	State PA	Zip Code 19116-1517	Transaction ID : VN7CZA6P124
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: McGinty, Kathleen, , ,		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		368876.35	

Full Name (Last, First, Middle Initial) of Payee Hardman, Zachery, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 11820 Edgewater Dr		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-6700	Transaction ID : VN7CZA6PA81
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Hardman, Zachery, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 11820 Edgewater Dr		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-6700	Transaction ID : VN7CZA6PD79
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: Trump, Donald, , ,		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		1672274.44	

(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 Hardman, Zachery, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 11820 Edgewater Dr		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-6700	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PG68
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Hardman, Zachery, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 11820 Edgewater Dr		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-6700	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PK55
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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 897326.39		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 Harlem, Justin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1010 N Hancock St Apt 210		Amount 77.20	
City Philadelphia	State PA	Zip Code 19123-2327	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NYX1
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	145.60
(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 Harlem, Justin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1010 N Hancock St Apt 210		Amount 77.20	
City Philadelphia	State PA	Zip Code 19123-2327	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6P0H0

Full Name (Last, First, Middle Initial) of Payee Harris, Tyler, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2437 Robertson Ave		Amount 64.98	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PR99

Full Name (Last, First, Middle Initial) of Payee Harris, Tyler, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2437 Robertson Ave		Amount 64.98	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PSV2

(a) SUBTOTAL of Itemized Independent Expenditures.....	207.16
(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 Harris, Tyler, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2437 Robertson Ave		Amount 64.98	
City Cincinnati	State OH	Zip Code 45212-3410	Transaction ID : VN7CZA6PVD7
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Harris, Tyler, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2437 Robertson Ave		Amount 64.98	
City Cincinnati	State OH	Zip Code 45212-3410	Transaction ID : VN7CZA6PWZ0
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Harrison, Anthony, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3124 Sedgefield Gate Rd		Amount 26.42	
City Greensboro	State NC	Zip Code 27407-6103	Transaction ID : VN7CZA6QZ83
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	156.38
(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 Harrison, Anthony, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3124 Sedgefield Gate Rd		Amount 26.42	
City Greensboro	State NC	Zip Code 27407-6103	Transaction ID : VN7CZA6R0G9
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: Ross, Deborah, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Harrison, Anthony, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3124 Sedgefield Gate Rd		Amount 26.42	
City Greensboro	State NC	Zip Code 27407-6103	Transaction ID : VN7CZA6R485
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Harrison, Anthony, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3124 Sedgefield Gate Rd		Amount 26.42	
City Greensboro	State NC	Zip Code 27407-6103	Transaction ID : VN7CZA6R5G9
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: Trump, Donald, , ,		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		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.26
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Harrison, Shenae, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 115 W 9th Ave		Amount 68.40	
City Homestead	State PA	Zip Code 15120-1085	Transaction ID : VN7CZA6NVY2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Harrison, Shenae, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 115 W 9th Ave		Amount 68.40	
City Homestead	State PA	Zip Code 15120-1085	Transaction ID : VN7CZA6NX33
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hartsfield, Freya, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7150 Lillian Ave		Amount 68.40	
City Saint Louis	State MO	Zip Code 63121-3039	Transaction ID : VN7CZA6RC81
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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 Haun, DeSota, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7187 Creekberry Ct		Amount 34.20	
City Pickerington	State OH	Zip Code 43147-7885	Transaction ID : VN7CZA6NK67
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haun, DeSota, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7187 Creekberry Ct		Amount 34.20	
City Pickerington	State OH	Zip Code 43147-7885	Transaction ID : VN7CZA6NMV3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haun, DeSota, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7187 Creekberry Ct		Amount 34.20	
City Pickerington	State OH	Zip Code 43147-7885	Transaction ID : VN7CZA6NPG2
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Haun, DeSota, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7187 Creekberry Ct		Amount 34.20	
City Pickerington	State OH	Zip Code 43147-7885	Transaction ID : VN7CZA6NR58
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorne Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R5X2
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorne Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R5Y0
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <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 Hawthorne Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R5Z7
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorne Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R605
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorne Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R613
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <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 Hawthorne Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R6D8
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorne Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R6E6
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorne Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R6F4
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 Hawthorne Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R6G2
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorne Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R6H0
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorne Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R7X7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Hawthorne Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R7Y5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hawthorne Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R7Z3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hawthorne Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R809
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <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 Hawthorne Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R817
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hawthorne Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R8D2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hawthorne Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R8E0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <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 Hawthorne Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R8F7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hawthorne Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R8G5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hawthorne Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7683 Thorndike Rd.		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA6R8H3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <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 Hayes, Foster, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1311 E 187th St # DN		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2827	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hayes, Foster, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1311 E 187th St # DN		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2827	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hayes, Foster, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1311 E 187th St # DN		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2827	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Hayes, Foster, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1311 E 187th St # DN		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2827	
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: Strickland, Ted, , ,		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)	
		897326.39	

Transaction ID : VN7CZA6PM82

Full Name (Last, First, Middle Initial) of Payee Head, Lenekra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 760 Aubert Ave		Amount 91.91	
City Saint Louis	State MO	Zip Code 63108-1647	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Transaction ID : VN7CZA6R9P6

Full Name (Last, First, Middle Initial) of Payee Healy, John, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
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: Clinton, Hillary, , ,		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)	
		1672274.44	

Transaction ID : VN7CZA6PRR7

(a) SUBTOTAL of Itemized Independent Expenditures.....	173.19
(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 Healy, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTA0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Healy, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PVW5
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Healy, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PXE8
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.24
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Henderson, David, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2191 Winslow Dr Apt 2		Amount 34.20	
City Columbus	State OH	Zip Code 43207-2263	Transaction ID : VN7CZA6NKK0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Henderson, David, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2191 Winslow Dr Apt 2		Amount 34.20	
City Columbus	State OH	Zip Code 43207-2263	Transaction ID : VN7CZA6NN86
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Henderson, David, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2191 Winslow Dr Apt 2		Amount 34.20	
City Columbus	State OH	Zip Code 43207-2263	Transaction ID : VN7CZA6NPX2
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Henderson, David, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2191 Winslow Dr Apt 2		Amount 34.20	
City Columbus	State OH	Zip Code 43207-2263	Transaction ID : VN7CZA6NRJ1
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Henry, Lawrence, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4924 Eaglesmere Dr		Amount 68.40	
City Orlando	State FL	Zip Code 32819-5620	Transaction ID : VN7CZA6P3V5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Henry, Lawrence, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4924 Eaglesmere Dr		Amount 68.40	
City Orlando	State FL	Zip Code 32819-5620	Transaction ID : VN7CZA6P5A6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Herbert, Terrell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2440 76th Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19150-1808	Transaction ID : VN7CZA6NZD7
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 checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Herbert, Terrell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2440 76th Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19150-1808	Transaction ID : VN7CZA6P116
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: McGinty, Kathleen, , ,		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		368876.35	

Full Name (Last, First, Middle Initial) of Payee Herrera, Azekiel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6726 Gadwall Ln		Amount 34.20	
City Orlando	State FL	Zip Code 32810-6023	Transaction ID : VN7CZA6P3C7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <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: Rubio, Marco, , ,		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		94857.42	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Herrera, Azekiel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6726 Gadwall Ln		Amount 34.20	
City Orlando	State FL	Zip Code 32810-6023	Transaction ID : VN7CZA6P4V8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Herrera, Azekiel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6726 Gadwall Ln		Amount 34.20	
City Orlando	State FL	Zip Code 32810-6023	Transaction ID : VN7CZA6P5Y4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Herrera, Azekiel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6726 Gadwall Ln		Amount 34.20	
City Orlando	State FL	Zip Code 32810-6023	Transaction ID : VN7CZA6P6H2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Hewitt, James, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 24.78	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA6QGX8
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hewitt, James, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 24.78	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA6QJ69
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hewitt, James, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 24.78	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA6QP18
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.34
(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 Hewitt, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 24.78	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA6QQA2
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: Trump, Donald, , ,		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	
		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Hewitt, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 3.13	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA6QWH8
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: Burr, Richard, , ,		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	
		236458.09	

Full Name (Last, First, Middle Initial) of Payee Hewitt, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 3.13	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA6QWT9
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: Ross, Deborah, , ,		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) _____	
		2016	
		236458.09	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.04
(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 Hewitt, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 3.13	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA6QXN2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hewitt, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 3.13	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA6QXY3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hickman, Marquese, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2311 Columbus St Apt E		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-3556	Transaction ID : VN7CZA6QYZ2
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.06
(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 Hickman, Marquese, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2311 Columbus St Apt E		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-3556	Transaction ID : VN7CZA6R078
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hickman, Marquese, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2311 Columbus St Apt E		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-3556	Transaction ID : VN7CZA6R3Z4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hickman, Marquese, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2311 Columbus St Apt E		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-3556	Transaction ID : VN7CZA6R578
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Hicks, Sharlene, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 720 S Eureka Ave		Amount 49.53	
City Columbus	State OH	Zip Code 43204-2914	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NJC2
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Hicks, Sharlene, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 720 S Eureka Ave		Amount 49.53	
City Columbus	State OH	Zip Code 43204-2914	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NMP8
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Hicks, Sharlene, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 720 S Eureka Ave		Amount 49.53	
City Columbus	State OH	Zip Code 43204-2914	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NNP6
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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.....	148.59
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Hicks, Sharlene, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 720 S Eureka Ave		Amount 49.53	
City Columbus	State OH	Zip Code 43204-2914	
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: Strickland, Ted, , ,		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)	
		897326.39	

Transaction ID : VN7CZA6NQB3

Full Name (Last, First, Middle Initial) of Payee Hill, Trarius, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7134 Cedar Bridge Ln		Amount 34.20	
City Blacklick	State OH	Zip Code 43004-9283	
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: Clinton, Hillary, , ,		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)	
		1672274.44	

Transaction ID : VN7CZA6NK18

Full Name (Last, First, Middle Initial) of Payee Hill, Trarius, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7134 Cedar Bridge Ln		Amount 34.20	
City Blacklick	State OH	Zip Code 43004-9283	
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: Trump, Donald, , ,		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)	
		1672274.44	

Transaction ID : VN7CZA6NMP4

(a) SUBTOTAL of Itemized Independent Expenditures.....	117.93
(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 Hill, Trarius, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7134 Cedar Bridge Ln		Amount 34.20	
City Blacklick	State OH	Zip Code 43004-9283	Transaction ID : VN7CZA6NPB2
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hill, Trarius, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7134 Cedar Bridge Ln		Amount 34.20	
City Blacklick	State OH	Zip Code 43004-9283	Transaction ID : VN7CZA6NR09
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Holbrook, Brandon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4510 Shenandoah Ave Apt 1E		Amount 89.16	
City Saint Louis	State MO	Zip Code 63110-3458	Transaction ID : VN7CZA6RB71
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: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	157.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Holifield, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1603 E 45th St # UP		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-2316	Transaction ID : VN7CZA6PB50
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Holifield, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1603 E 45th St # UP		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-2316	Transaction ID : VN7CZA6PE48
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: Trump, Donald, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Holifield, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1603 E 45th St # UP		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-2316	Transaction ID : VN7CZA6PH37
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: Portman, Rob, , ,		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		897326.39	

(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 Holifield, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1603 E 45th St # UP		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-2316	
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: Strickland, Ted, , ,		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)	
		897326.39	

Transaction ID : VN7CZA6PM24

Full Name (Last, First, Middle Initial) of Payee Hollie Davis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1633 W 100th St		Amount 76.95	
City Chicago	State IL	Zip Code 60643-2128	
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: Kirk, Mark, , ,		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)	
		102711.83	

Transaction ID : VN7CZA6NTX2

Full Name (Last, First, Middle Initial) of Payee Hollie Davis		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1633 W 100th St		Amount 76.95	
City Chicago	State IL	Zip Code 60643-2128	
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: Duckworth, Tammy, , ,		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)	
		102711.83	

Transaction ID : VN7CZA6NVN1

(a) SUBTOTAL of Itemized Independent Expenditures.....	188.10
(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 Holmes, Vikicia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3007 Whisper Lake Lane		Amount 68.40	
City Orlando	State FL	Zip Code 32805	Transaction ID : VN7CZA6P3G8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <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: Murphy, Patrick, , ,		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		94857.42	

Full Name (Last, First, Middle Initial) of Payee Holmes, Vikicia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3007 Whisper Lake Lane		Amount 68.40	
City Orlando	State FL	Zip Code 32805	Transaction ID : VN7CZA6P4Z9
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Holmquist, Erland, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1465 Rydal St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15205-3834	Transaction ID : VN7CZA6NWM6
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: Clinton, Hillary, , ,		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		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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 Holmquist, Erland, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1465 Rydal St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15205-3834	
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: McGinty, Kathleen, , ,		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 : VN7CZA6NXS6	

Full Name (Last, First, Middle Initial) of Payee Homewood Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5893 American Way		Amount 14.67	
City Orlando	State FL	Zip Code 32819-8201	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		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 : VN7CZA6P750	

Full Name (Last, First, Middle Initial) of Payee Homewood Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5893 American Way		Amount 57.90	
City Orlando	State FL	Zip Code 32819-8201	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		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 : VN7CZA6P7M9	

(a) SUBTOTAL of Itemized Independent Expenditures.....	140.97
(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 Homewood Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5893 American Way		Amount 57.90	
City Orlando	State FL	Zip Code 32819-8201	
Purpose of Expenditure Lodging		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: Clinton, Hillary, , ,		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)	
		1672274.44	

Transaction ID : VN7CZA6P837

Full Name (Last, First, Middle Initial) of Payee Homewood Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5893 American Way		Amount 14.67	
City Orlando	State FL	Zip Code 32819-8201	
Purpose of Expenditure Lodging		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: Trump, Donald, , ,		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)	
		1672274.44	

Transaction ID : VN7CZA6P8J6

Full Name (Last, First, Middle Initial) of Payee Hopkins, Brendan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 9211 NE 15th Ave		Amount 17.10	
City Vancouver	State WA	Zip Code 98665-9126	
Purpose of Expenditure Salary and Benefits		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: Burr, Richard, , ,		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)	
		236458.09	

Transaction ID : VN7CZA6Q198

(a) SUBTOTAL of Itemized Independent Expenditures.....	89.67
(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 Hopkins, Brendan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 9211 NE 15th Ave		Amount 17.10	
City Vancouver	State WA	Zip Code 98665-9126	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6Q291
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09		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 Hopkins, Brendan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 9211 NE 15th Ave		Amount 17.10	
City Vancouver	State WA	Zip Code 98665-9126	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6Q597
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Hopkins, Brendan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 9211 NE 15th Ave		Amount 17.10	
City Vancouver	State WA	Zip Code 98665-9126	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6Q698
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Hopkins, Brendan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 9211 NE 15th Ave		Amount 3.13	
City Vancouver	State WA	Zip Code 98665-9126	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QC59
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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		236458.09	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 Hopkins, Brendan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 9211 NE 15th Ave		Amount 3.13	
City Vancouver	State WA	Zip Code 98665-9126	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QCK0
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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		236458.09	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 Hopkins, Brendan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 9211 NE 15th Ave		Amount 3.13	
City Vancouver	State WA	Zip Code 98665-9126	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QDX1
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		1672274.44	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.....	9.39
(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 Hopkins, Brendan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 9211 NE 15th Ave		Amount 3.13	
City Vancouver	State WA	Zip Code 98665-9126	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA6QEB2
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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) _____
		1672274.44	2016

Full Name (Last, First, Middle Initial) of Payee Hopper, Gregory, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8532 NE Knott St Unit D		Amount 12.50	
City Portland	State OR	Zip Code 97220-5388	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA6RJD3
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO 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) _____
		81793.49	2016

Full Name (Last, First, Middle Initial) of Payee Horak, Dejay, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 17522 NW Ashland Dr		Amount 68.40	
City Portland	State OR	Zip Code 97229-3370	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6RAZ9
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO 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) _____
		81793.49	2016

(a) SUBTOTAL of Itemized Independent Expenditures.....	84.03
(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 Horak, Dejay, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 17522 NW Ashland Dr		Amount 12.50	
City Portland	State OR	Zip Code 97229-3370	Transaction ID : VN7CZA6RK03
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Howard, Karen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4609 Brooklyn Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-3823	Transaction ID : VN7CZA6PAV1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Howard, Karen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4609 Brooklyn Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-3823	Transaction ID : VN7CZA6PDT9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	80.90
(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 Howard, Karen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4609 Brooklyn Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-3823	Transaction ID : VN7CZA6PGS8
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Howard, Karen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4609 Brooklyn Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44109-3823	Transaction ID : VN7CZA6PKR5
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Howell, Marcus, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 101 Roup Ave Apt 3		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15206-3437	Transaction ID : VN7CZA6NW66
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <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 Howell, Marcus, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 101 Roup Ave Apt 3		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15206-3437	
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: McGinty, Kathleen, , ,		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 2016 <input type="checkbox"/> Other (specify)	
		368876.35	

Full Name (Last, First, Middle Initial) of Payee Hubbell-Staeble, Nathan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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 type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 2016 <input type="checkbox"/> Other (specify)	
		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Hubbell-Staeble, Nathan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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 type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 2016 <input type="checkbox"/> Other (specify)	
		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	147.74
(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 Hubbell-Staeble, Nathan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hubbell-Staeble, Nathan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hullum, Justin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1859 W 58th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3252	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	113.54
(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 Hullum, Justin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1859 W 58th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3252	Transaction ID : VN7CZA6PC45
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hullum, Justin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1859 W 58th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3252	Transaction ID : VN7CZA6PF33
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hullum, Justin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1859 W 58th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-3252	Transaction ID : VN7CZA6PJ22
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Hunt, Charles, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 17.10	
City Chapel Hill	State NC	Zip Code 27514-7033	Transaction ID : VN7CZA6QGP3
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hunt, Charles, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 17.10	
City Chapel Hill	State NC	Zip Code 27514-7033	Transaction ID : VN7CZA6QHZ6
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hunt, Charles, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 17.10	
City Chapel Hill	State NC	Zip Code 27514-7033	Transaction ID : VN7CZA6QNT3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Hunt, Charles, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 17.10	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QQ37

Full Name (Last, First, Middle Initial) of Payee Hutchinson, Shirine, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5416 Memorial Dr		Amount 68.40	
City Orlando	State FL	Zip Code 32821-8110	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P304

Full Name (Last, First, Middle Initial) of Payee Hutchinson, Shirine, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5416 Memorial Dr		Amount 68.40	
City Orlando	State FL	Zip Code 32821-8110	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P4F3

(a) SUBTOTAL of Itemized Independent Expenditures.....	153.90
(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 Hutsell, Tonia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PR65
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hutsell, Tonia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PSR8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hutsell, Tonia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PVA3
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Hutsell, Tonia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PWW6
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 10 / 28 / 2016	
Mailing Address 6737 S Bell Ave		Amount 118.88	
City Chicago	State IL	Zip Code 60636-2524	Transaction ID : VN7CZA6NTD5
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: Kirk, Mark, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		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 Ikea Johnson		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6737 S Bell Ave		Amount 118.88	
City Chicago	State IL	Zip Code 60636-2524	Transaction ID : VN7CZA6NV55
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: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	271.96
(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 Ishman, Isaiah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3114 SE 24th Ter		Amount 68.40	
City Gresham	State OR	Zip Code 97080-7202	Transaction ID : VN7CZA6RB07
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: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ishman, Isaiah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3114 SE 24th Ter		Amount 12.50	
City Gresham	State OR	Zip Code 97080-7202	Transaction ID : VN7CZA6RK11
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jackson, Austin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 17.10	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6Q1A6
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	98.00
(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 Jackson, Austin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 17.10	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6Q2A9
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jackson, Austin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 17.10	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6Q5A5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jackson, Austin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 17.10	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6Q6A6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Jackson, Austin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 3.13	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6QC41
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: Burr, Richard, , ,		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 Jackson, Austin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 3.13	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6QCJ2
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: Ross, Deborah, , ,		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 Jackson, Austin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 3.13	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6QDW4
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: Clinton, Hillary, , ,		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.....	9.39
(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 Jackson, Austin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 3.13	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6QE4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jackson, Latasha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2448 Princess Dr		Amount 68.40	
City Saint Louis	State MO	Zip Code 63136-5937	Transaction ID : VN7CZA6RC99
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee James, Steven, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3810 Louise Ct		Amount 34.20	
City Grove City	State OH	Zip Code 43123-2342	Transaction ID : VN7CZA6NJW8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	105.73
(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 James, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3810 Louise Ct		Amount 34.20	
City Grove City	State OH	Zip Code 43123-2342	Transaction ID : VN7CZA6NMH4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee James, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3810 Louise Ct		Amount 34.20	
City Grove City	State OH	Zip Code 43123-2342	Transaction ID : VN7CZA6NP63
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee James, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3810 Louise Ct		Amount 34.20	
City Grove City	State OH	Zip Code 43123-2342	Transaction ID : VN7CZA6NQV9
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Jarvis, Asia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6704 Black Walnut Ct		Amount 68.40	
City Saint Louis	State MO	Zip Code 63134-1525	Transaction ID : VN7CZA6RAT0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <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: Kander, Jason, , ,		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		81793.49	

Full Name (Last, First, Middle Initial) of Payee Jean-Baptiste, Jack, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 89.16	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA6RC66
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <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: Kander, Jason, , ,		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		81793.49	

Full Name (Last, First, Middle Initial) of Payee Jean-Baptiste, Jack, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 12.50	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA6RJH4
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <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: Kander, Jason, , ,		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		81793.49	

(a) SUBTOTAL of Itemized Independent Expenditures.....	170.06
(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 Jean-Baptiste, Jessie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 89.16	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA6RA20
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jean-Baptiste, Jessie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 12.50	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA6RJQ2
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement 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 Randazzo		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 830 W Sunnyside Ave		Amount 76.95	
City Chicago	State IL	Zip Code 60640-6180	Transaction ID : VN7CZA6NTZ7
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: Kirk, Mark, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	178.61
(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 Jeffery Randazzo		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 830 W Sunnyside Ave		Amount 76.95	
City Chicago	State IL	Zip Code 60640-6180	Transaction ID : VN7CZA6NVQ7
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: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jenkins, Akeem, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 307 N 60th St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19139-1206	Transaction ID : VN7CZA6P055
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jenkins, Akeem, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 307 N 60th St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19139-1206	Transaction ID : VN7CZA6P1S6
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	213.75
(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 Jennings, Kenyatta, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City State Zip Code Cincinnati OH 45220-2216	Transaction ID : VN7CZA6PRK8		
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jennings, Kenyatta, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City State Zip Code Cincinnati OH 45220-2216	Transaction ID : VN7CZA6PT51		
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jennings, Kenyatta, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City State Zip Code Cincinnati OH 45220-2216	Transaction ID : VN7CZA6PVQ6		
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Jennings, Kenyatta, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City State Zip Code Cincinnati OH 45220-2216	Category/Type	Transaction ID : VN7CZA6PX99	
Purpose of Expenditure Salary and Benefits	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: Strickland, Ted, , ,		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 897326.39			

Full Name (Last, First, Middle Initial) of Payee Johnson, Antoine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2101 E Amelia St		Amount 68.40	
City State Zip Code Orlando FL 32803-5512	Category/Type	Transaction ID : VN7CZA6P312	
Purpose of Expenditure Salary and Benefits	Office Sought: <input type="checkbox"/> House State: FL <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: Murphy, Patrick, , ,		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 94857.42			

Full Name (Last, First, Middle Initial) of Payee Johnson, Antoine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2101 E Amelia St		Amount 68.40	
City State Zip Code Orlando FL 32803-5512	Category/Type	Transaction ID : VN7CZA6P4G1	
Purpose of Expenditure Salary and Benefits	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: Clinton, Hillary, , ,		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 1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Johnson, Jelisa, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4202 Delbert Ave Apt A		Amount 5.34	
City Durham	State NC	Zip Code 27704-8062	Transaction ID : VN7CZA6QHW3
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Johnson, Jelisa, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4202 Delbert Ave Apt A		Amount 5.34	
City Durham	State NC	Zip Code 27704-8062	Transaction ID : VN7CZA6QK54
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Johnson, Jelisa, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4202 Delbert Ave Apt A		Amount 5.34	
City Durham	State NC	Zip Code 27704-8062	Transaction ID : VN7CZA6QQ03
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.02
(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 Johnson, Jelisa, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4202 Delbert Ave Apt A		Amount 5.34	
City Durham	State NC	Zip Code 27704-8062	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QR97

Full Name (Last, First, Middle Initial) of Payee Johnson, Paris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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	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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P972

Full Name (Last, First, Middle Initial) of Payee Johnson, Paris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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	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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PC60

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.74
(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 Johnson, Paris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 201504		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-8108	Transaction ID : VN7CZA6PF59
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Johnson, Paris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 201504		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-8108	Transaction ID : VN7CZA6PJ47
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jones, Anita, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 506 Wigman Dr		Amount 68.40	
City Maitland	State FL	Zip Code 32751-6936	Transaction ID : VN7CZA6P420
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: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <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 Jones, Anita, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 506 Wigman Dr		Amount 68.40	
City Maitland	State FL	Zip Code 32751-6936	Transaction ID : VN7CZA6P5H2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jones, Jarrett, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4951 Cote Brilliante Ave		Amount 89.16	
City Saint Louis	State MO	Zip Code 63113-1712	Transaction ID : VN7CZA6R9M0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jones, Larry, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 303 Normandy St		Amount 17.10	
City Durham	State NC	Zip Code 27707-3069	Transaction ID : VN7CZA6QH19
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	174.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Jones, Larry, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 303 Normandy St		Amount 17.10	
City Durham	State NC	Zip Code 27707-3069	Transaction ID : VN7CZA6QJA0
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: Ross, Deborah, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Jones, Larry, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 303 Normandy St		Amount 17.10	
City Durham	State NC	Zip Code 27707-3069	Transaction ID : VN7CZA6QP50
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: Clinton, Hillary, , ,		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 1672274.44			

Full Name (Last, First, Middle Initial) of Payee Jones, Larry, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 303 Normandy St		Amount 17.10	
City Durham	State NC	Zip Code 27707-3069	Transaction ID : VN7CZA6QQE4
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: Trump, Donald, , ,		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 1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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, Dominique, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1754 Lee Rd		Amount 39.65	
City Cleveland	State OH	Zip Code 44118-1736	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6P8W5
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Jordan, Dominique, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1754 Lee Rd		Amount 39.65	
City Cleveland	State OH	Zip Code 44118-1736	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PBV3
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Jordan, Dominique, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1754 Lee Rd		Amount 39.65	
City Cleveland	State OH	Zip Code 44118-1736	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PET2
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		Office Sought: <input checked="" type="checkbox"/> Senate	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 897326.39		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.....	118.95
(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 Jordan, Dominique, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1754 Lee Rd		Amount 39.65	
City Cleveland	State OH	Zip Code 44118-1736	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joseph Hart		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6815 N Sheridan Rd		Amount 91.91	
City Chicago	State IL	Zip Code 60626-7880	
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: Kirk, Mark, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		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 Joseph Hart		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6815 N Sheridan Rd		Amount 91.91	
City Chicago	State IL	Zip Code 60626-7880	
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: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	223.47
(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 Joyce, Brendan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1897 W 74th St Apt 6		Amount 39.65	
City Cleveland	State OH	Zip Code 44102-2982	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6P907
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Joyce, Brendan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1897 W 74th St Apt 6		Amount 39.65	
City Cleveland	State OH	Zip Code 44102-2982	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PBZ5
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Joyce, Brendan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1897 W 74th St Apt 6		Amount 39.65	
City Cleveland	State OH	Zip Code 44102-2982	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PEY4
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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.....	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 Joyce, Brendan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1897 W 74th St Apt 6		Amount 39.65	
City Cleveland	State OH	Zip Code 44102-2982	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee JVA Campaigns		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 240 N 5th St Ste 360		Amount 4825.00	
City Columbus	State OH	Zip Code 43215-2600	
Purpose of Expenditure Printing		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kafati, Simon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2271 Bagdad Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32833-3812	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	4898.85
(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 Kafati, Simon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2271 Bagdad Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32833-3812	Transaction ID : VN7CZA6P4B1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kafati, Simon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2271 Bagdad Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32833-3812	Transaction ID : VN7CZA6P5T3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kafati, Simon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2271 Bagdad Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32833-3812	Transaction ID : VN7CZA6P6D1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Karel, Douglas, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7841 Fairwind Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43235-4525	Transaction ID : VN7CZA6NJM5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Karel, Douglas, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7841 Fairwind Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43235-4525	Transaction ID : VN7CZA6NM91
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Karel, Douglas, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7841 Fairwind Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43235-4525	Transaction ID : VN7CZA6NNY0
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Karel, Douglas, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7841 Fairwind Dr		Amount 34.20	
City Columbus	State OH	Zip Code 43235-4525	Transaction ID : VN7CZA6NQG6
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1701 Sterling Rd		Amount 118.88	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA6NTG9
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: Kirk, Mark, , ,		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		102711.83	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1701 Sterling Rd		Amount 118.88	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA6NV89
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: Duckworth, Tammy, , ,		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		102711.83	

(a) SUBTOTAL of Itemized Independent Expenditures.....	271.96
(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 Katherine Gregg		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 925 W Huron St		Amount 114.00	
City Chicago	State IL	Zip Code 60642-5780	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NTB9
Name of Federal Candidate Supported or Opposed by Expenditure: Kirk, Mark, , ,		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		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	
		102711.83	

Full Name (Last, First, Middle Initial) of Payee Katherine Gregg		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 925 W Huron St		Amount 114.00	
City Chicago	State IL	Zip Code 60642-5780	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NV39
Name of Federal Candidate Supported or Opposed by Expenditure: Duckworth, Tammy, , ,		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		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	
		102711.83	

Full Name (Last, First, Middle Initial) of Payee Kelly, Lydia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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	Transaction ID : VN7CZA6P9F5
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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	
		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	262.20
(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 Kelly, Lydia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 18915 Detroit Ext Apt 601		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-3242	Transaction ID : VN7CZA6PCE4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kelly, Lydia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 18915 Detroit Ext Apt 601		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-3242	Transaction ID : VN7CZA6PFD2
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kelly, Lydia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 18915 Detroit Ext Apt 601		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-3242	Transaction ID : VN7CZA6PJC1
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Kennedy, Ryan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12411 Central Valley Rd NE		Amount 68.40	
City Poulsbo	State WA	Zip Code 98370-8199	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6RBW7
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought 81793.49		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 Kennedy, Ryan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12411 Central Valley Rd NE		Amount 12.50	
City Poulsbo	State WA	Zip Code 98370-8199	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6RK52
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought 81793.49		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 Kern, Taylor, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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	Transaction ID : VN7CZA6PQR4
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	115.10
(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 Kern, Taylor, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA6PSA7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kern, Taylor, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA6PTW2
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kern, Taylor, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 410 King Ave Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA6PWE5
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Kerr-Lewis, Noir, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2127 Picador Ct		Amount 68.40	
City Saint Louis	State MO	Zip Code 63136-4106	Transaction ID : VN7CZA6RAE5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <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: Kander, Jason, , ,		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		81793.49	

Full Name (Last, First, Middle Initial) of Payee Keyana Davis		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6036 S Prairie Ave		Amount 76.95	
City Chicago	State IL	Zip Code 60637-2238	Transaction ID : VN7CZA6NTC7
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: Kirk, Mark, , ,		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		102711.83	

Full Name (Last, First, Middle Initial) of Payee Keyana Davis		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6036 S Prairie Ave		Amount 76.95	
City Chicago	State IL	Zip Code 60637-2238	Transaction ID : VN7CZA6NV47
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: Duckworth, Tammy, , ,		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		102711.83	

(a) SUBTOTAL of Itemized Independent Expenditures.....	222.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Keyante Lloyd		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6759 S Elizabeth St		Amount 76.95	
City Chicago	State IL	Zip Code 60636-2921	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NTS0
Name of Federal Candidate Supported or Opposed by Expenditure: Kirk, Mark, , ,		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought 102711.83		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 Keyante Lloyd		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6759 S Elizabeth St		Amount 76.95	
City Chicago	State IL	Zip Code 60636-2921	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NVH0
Name of Federal Candidate Supported or Opposed by Expenditure: Duckworth, Tammy, , ,		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: IL District: 00
Calendar Year-To-Date Per Election for Office Sought 102711.83		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 Keys, Dorothy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2024 Greenheath Dr		Amount 68.40	
City Florissant	State MO	Zip Code 63033-1215	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6RB89
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought 81793.49		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.....	222.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee King, Lashanda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5501 Alcott Ave		Amount 68.40	
City Saint Louis	State MO	Zip Code 63120-2516	Transaction ID : VN7CZA6RBJ8
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: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee King, Matthew, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 52 Locust St		Amount 68.40	
City Etna	State PA	Zip Code 15223-2175	Transaction ID : VN7CZA6NW24
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee King, Matthew, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 52 Locust St		Amount 68.40	
City Etna	State PA	Zip Code 15223-2175	Transaction ID : VN7CZA6NX74
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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 King, Thomas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 17.10	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA6QGS6
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee King, Thomas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 17.10	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA6QJ20
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee King, Thomas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 17.10	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA6QN7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee King, Thomas, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 17.10	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA6QQ61
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee King, Thomas, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 3.13	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA6QWF2
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee King, Thomas, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 3.13	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA6QWR3
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	23.36
(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 King, Thomas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 3.13	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA6QXK6
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 King, Thomas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 3.13	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA6QXW7
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Kolschmidt, Joshua, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 723 Bryden Rd Apt B		Amount 38.60	
City Columbus	State OH	Zip Code 43205-1037	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NJB4
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	44.86
(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 Kolschmidt, Joshua, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 723 Bryden Rd Apt B		Amount 38.60	
City Columbus	State OH	Zip Code 43205-1037	Transaction ID : VN7CZA6NM00
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kolschmidt, Joshua, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 723 Bryden Rd Apt B		Amount 38.60	
City Columbus	State OH	Zip Code 43205-1037	Transaction ID : VN7CZA6NNN8
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kolschmidt, Joshua, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 723 Bryden Rd Apt B		Amount 38.60	
City Columbus	State OH	Zip Code 43205-1037	Transaction ID : VN7CZA6NQA5
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.80
(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 Kotlarik, Kristofer, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1126 Bryden Rd		Amount 48.09	
City Columbus	State OH	Zip Code 43205-1822	Transaction ID : VN7CZA6NJF6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kotlarik, Kristofer, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1126 Bryden Rd		Amount 48.09	
City Columbus	State OH	Zip Code 43205-1822	Transaction ID : VN7CZA6NM41
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kotlarik, Kristofer, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1126 Bryden Rd		Amount 48.09	
City Columbus	State OH	Zip Code 43205-1822	Transaction ID : VN7CZA6NNS0
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	144.27
(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 Kotlarik, Kristofer, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1126 Bryden Rd		Amount 48.09	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kowalski, Matthew, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4885A McKnight Rd., Apt. 294		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15237-3405	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kowalski, Matthew, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4885A McKnight Rd., Apt. 294		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15237-3405	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	184.89
(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 Lakendrea Pike		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8421 S Kimbark Ave		Amount 91.91	
City Chicago	State IL	Zip Code 60619-6442	Transaction ID : VN7CZA6NTJ5
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: Kirk, Mark, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lakendrea Pike		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8421 S Kimbark Ave		Amount 91.91	
City Chicago	State IL	Zip Code 60619-6442	Transaction ID : VN7CZA6NVA4
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: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lampon, Manuel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2313 N Park Ave Apt 1		Amount 94.11	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA6NZ05
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	277.93
(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 Lampon, Manuel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2313 N Park Ave Apt 1		Amount 94.11	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA6P0M3
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lauren Randle		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1727 W 101st St		Amount 76.95	
City Chicago	State IL	Zip Code 60643-2138	Transaction ID : VN7CZA6NTY0
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: Kirk, Mark, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lauren Randle		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1727 W 101st St		Amount 76.95	
City Chicago	State IL	Zip Code 60643-2138	Transaction ID : VN7CZA6NVP9
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: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	248.01
(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 Lawrence, Jacob, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 920 Reiss St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-1559	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NW99

Full Name (Last, First, Middle Initial) of Payee Lawrence, Jacob, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 920 Reiss St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-1559	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NXE0

Full Name (Last, First, Middle Initial) of Payee Lawson, Tafyah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3752 E 127th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2978	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P9K5

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Lawson, Tafyah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3752 E 127th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2978	Transaction ID : VN7CZA6PCJ5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Lawson, Tafyah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3752 E 127th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2978	Transaction ID : VN7CZA6PFH4
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Lawson, Tafyah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3752 E 127th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-2978	Transaction ID : VN7CZA6PJG2
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Lebel, David, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5972 Paint Creek Way		Amount 48.09	
City Hilliard	State OH	Zip Code 43026-7735	Transaction ID : VN7CZA6NJH1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lebel, David, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5972 Paint Creek Way		Amount 48.09	
City Hilliard	State OH	Zip Code 43026-7735	Transaction ID : VN7CZA6NM67
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lebel, David, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5972 Paint Creek Way		Amount 48.09	
City Hilliard	State OH	Zip Code 43026-7735	Transaction ID : VN7CZA6NNV6
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	144.27
(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 Lebel, David, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5972 Paint Creek Way		Amount 48.09	
City Hilliard	State OH	Zip Code 43026-7735	Transaction ID : VN7CZA6NQG3
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lee, Eun, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1107 Wineberry Ct		Amount 47.06	
City Ocoee	State FL	Zip Code 34761-3417	Transaction ID : VN7CZA6P2R1
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: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lee, Eun, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1107 Wineberry Ct		Amount 47.06	
City Ocoee	State FL	Zip Code 34761-3417	Transaction ID : VN7CZA6P470
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: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	142.21
(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 Lee, Eun, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1107 Wineberry Ct		Amount 47.06	
City Ocoee	State FL	Zip Code 34761-3417	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6P5P1
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Lee, Eun, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1107 Wineberry Ct		Amount 47.06	
City Ocoee	State FL	Zip Code 34761-3417	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6P691
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Lewis, Devonta, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1611 Crystal Creek Dr		Amount 17.10	
City Durham	State NC	Zip Code 27712-2485	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QH93
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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 236458.09		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.....	111.22
(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 Lewis, Devonta, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1611 Crystal Creek Dr		Amount 17.10	
City Durham	State NC	Zip Code 27712-2485	Transaction ID : VN7CZA6QJJ4
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: Ross, Deborah, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Lewis, Devonta, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1611 Crystal Creek Dr		Amount 17.10	
City Durham	State NC	Zip Code 27712-2485	Transaction ID : VN7CZA6QPD3
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: Clinton, Hillary, , ,		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 1672274.44			

Full Name (Last, First, Middle Initial) of Payee Lewis, Devonta, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1611 Crystal Creek Dr		Amount 17.10	
City Durham	State NC	Zip Code 27712-2485	Transaction ID : VN7CZA6QQP7
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: Trump, Donald, , ,		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 1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Lewis, Johnny, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1202 Marlowe Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-2628	Transaction ID : VN7CZA6P8V7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Lewis, Johnny, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1202 Marlowe Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-2628	Transaction ID : VN7CZA6PBT6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Lewis, Johnny, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1202 Marlowe Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-2628	Transaction ID : VN7CZA6PES4
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Lewis, Johnny, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1202 Marlowe Ave		Amount 34.20	
City Lakewood	State OH	Zip Code 44107-2628	Transaction ID : VN7CZA6PHR3
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lewis, Joshua, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 39.63	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA6P8X3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lewis, Joshua, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 39.63	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA6PBW1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Lewis, Joshua, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lewis, Joshua, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lindsey, Dontell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3132 Sorento St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-2460	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	147.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Lindsey, Dontell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3132 Sorento St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-2460	Transaction ID : VN7CZA6NXX9
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Locke, Joshua, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PRM6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Locke, Joshua, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PT69
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <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 Locke, Joshua, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PVR4
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Locke, Joshua, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PXA7
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lomprez, Sarah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 2963		Amount 68.40	
City Sanford	State FL	Zip Code 32772-2963	Transaction ID : VN7CZA6P3A1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		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 Lomprez, Sarah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 2963		Amount 68.40	
City Sanford	State FL	Zip Code 32772-2963	Transaction ID : VN7CZA6P4S2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Longhorne, Amir, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA6QY58
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Longhorne, Amir, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA6QZD2
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(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 Longhorne, Amir, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA6R358
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Longhorne, Amir, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA6R4D4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lopez, Julissa, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 606 Lee Rd Apt 229		Amount 68.40	
City Orlando	State FL	Zip Code 32810-5613	Transaction ID : VN7CZA6P3N8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(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 Lopez, Julissa, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 606 Lee Rd Apt 229		Amount 68.40	
City Orlando	State FL	Zip Code 32810-5613	Transaction ID : VN7CZA6P549
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Lowe, Chris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PS74
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Lowe, Chris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTS9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <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 Lowe, Chris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 : VN7CZA6PWB2
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Lowe, Chris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 : VN7CZA6PXX7
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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 897326.39		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 Lowe, Easter, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3554 134th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44114	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PAC2
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Lowe, Easter, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3554 134th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44114	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PDB1
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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		1672274.44	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 Lowe, Easter, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3554 134th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44114	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PGA9
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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		897326.39	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 Lowe, Easter, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3554 134th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44114	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PK97
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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		897326.39	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 Lunsford, Ronald, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 : VN7CZA6PS40
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Lunsford, Ronald, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 : VN7CZA6PTP5
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Lunsford, Ronald, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 : VN7CZA6PW88
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Lunsford, Ronald, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PXT3
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Luton, Draye, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1201 Buena Vista Ave NE		Amount 34.20	
City Warren	State OH	Zip Code 44483-3907	Transaction ID : VN7CZA6PB83
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Luton, Draye, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1201 Buena Vista Ave NE		Amount 34.20	
City Warren	State OH	Zip Code 44483-3907	Transaction ID : VN7CZA6PE72
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Luton, Draye, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1201 Buena Vista Ave NE		Amount 34.20	
City Warren	State OH	Zip Code 44483-3907	Transaction ID : VN7CZA6PH60
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Luton, Draye, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1201 Buena Vista Ave NE		Amount 34.20	
City Warren	State OH	Zip Code 44483-3907	Transaction ID : VN7CZA6PM58
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Luttery, Julius, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1578 E Cooke Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43224-2107	Transaction ID : VN7CZA6NKD3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Luttery, Julius, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1578 E Cooke Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43224-2107	Transaction ID : VN7CZA6NN28
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Luttery, Julius, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1578 E Cooke Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43224-2107	Transaction ID : VN7CZA6NPQ7
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Luttery, Julius, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1578 E Cooke Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43224-2107	Transaction ID : VN7CZA6NRC4
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 MacMillan, Alexander, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 710 Morehead Ave Apt 5		Amount 25.73	
City Greensboro	State NC	Zip Code 27401-2363	Transaction ID : VN7CZA6QYA8
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee MacMillan, Alexander, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 710 Morehead Ave Apt 5		Amount 25.73	
City Greensboro	State NC	Zip Code 27401-2363	Transaction ID : VN7CZA6QZJ2
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee MacMillan, Alexander, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 710 Morehead Ave Apt 5		Amount 25.73	
City Greensboro	State NC	Zip Code 27401-2363	Transaction ID : VN7CZA6R3A8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	77.19
(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 MacMillan, Alexander, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 710 Morehead Ave Apt 5		Amount 25.73	
City Greensboro	State NC	Zip Code 27401-2363	Transaction ID : VN7CZA6R4J4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maes, Paul, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 17.10	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA6Q0R4
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maes, Paul, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 17.10	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA6Q1R6
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	59.93
(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 Maes, Paul, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 17.10	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA6Q4R3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maes, Paul, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 17.10	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA6Q5R4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maes, Paul, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 3.13	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA6QC00
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.33
(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 Maes, Paul, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 3.13	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA6QCE0
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: Ross, Deborah, , ,		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)	
		236458.09	

Full Name (Last, First, Middle Initial) of Payee Maes, Paul, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 3.13	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA6QDR2
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: Clinton, Hillary, , ,		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)	
		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Maes, Paul, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 3.13	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA6QE63
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: Trump, Donald, , ,		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)	
		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.39
(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 Mahaney, Glenn Katheren, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1503 W Friendly Ave Apt B		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-4620	Transaction ID : VN7CZA6QYM5
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mahaney, Glenn Katheren, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1503 W Friendly Ave Apt B		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-4620	Transaction ID : VN7CZA6QZW1
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mahaney, Glenn Katheren, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1503 W Friendly Ave Apt B		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-4620	Transaction ID : VN7CZA6R3M7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Mahaney, Glenn Katheren, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1503 W Friendly Ave Apt B		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-4620	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6R4W1

Full Name (Last, First, Middle Initial) of Payee Makupson, Tanda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1428 Golden Gate Blvd		Amount 34.20	
City Mayfield Hts	State OH	Zip Code 44124-6832	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P9B3

Full Name (Last, First, Middle Initial) of Payee Makupson, Tanda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1428 Golden Gate Blvd		Amount 34.20	
City Mayfield Hts	State OH	Zip Code 44124-6832	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PCA2

(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 Makupson, Tanda, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1428 Golden Gate Blvd		Amount 34.20	
City Mayfield Hts	State OH	Zip Code 44124-6832	Transaction ID : VN7CZA6PF90
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Makupson, Tanda, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1428 Golden Gate Blvd		Amount 34.20	
City Mayfield Hts	State OH	Zip Code 44124-6832	Transaction ID : VN7CZA6PJ89
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Maldonado, Angelica, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 6310 Cottage St		Amount 21.38	
City Philadelphia	State PA	Zip Code 19135-3221	Transaction ID : VN7CZA6P089
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	89.78
(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 Maldonado, Angelica, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6310 Cottage St		Amount 21.38	
City Philadelphia	State PA	Zip Code 19135-3221	
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: McGinty, Kathleen, , ,		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 : VN7CZA6P1W9	

Full Name (Last, First, Middle Initial) of Payee Mann, Ashley, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1420 W 114th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-2363	
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: Clinton, Hillary, , ,		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 : VN7CZA6PAF6	

Full Name (Last, First, Middle Initial) of Payee Mann, Ashley, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1420 W 114th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-2363	
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: Trump, Donald, , ,		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 : VN7CZA6PDE4	

(a) SUBTOTAL of Itemized Independent Expenditures.....	89.78
(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 Mann, Ashley, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1420 W 114th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-2363	Transaction ID : VN7CZA6PGD3
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mann, Ashley, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1420 W 114th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-2363	Transaction ID : VN7CZA6PKC0
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mann, Keyana, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1420 W 114th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-2363	Transaction ID : VN7CZA6PAE8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Mann, Keyana, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1420 W 114th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-2363	Transaction ID : VN7CZA6PDD6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mann, Keyana, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1420 W 114th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-2363	Transaction ID : VN7CZA6PGC5
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mann, Keyana, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1420 W 114th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-2363	Transaction ID : VN7CZA6PKB2
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Manning, Shatia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6006 Pine Glen Trl		Amount 17.10	
City Durham	State NC	Zip Code 27713-9725	Transaction ID : VN7CZA6QH35
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Manning, Shatia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6006 Pine Glen Trl		Amount 17.10	
City Durham	State NC	Zip Code 27713-9725	Transaction ID : VN7CZA6QJC6
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Manning, Shatia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6006 Pine Glen Trl		Amount 17.10	
City Durham	State NC	Zip Code 27713-9725	Transaction ID : VN7CZA6QP76
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Manning, Shatia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6006 Pine Glen Trl		Amount 17.10	
City Durham	State NC	Zip Code 27713-9725	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QQG0

Full Name (Last, First, Middle Initial) of Payee Manns, Olori, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5202 Thomas St		Amount 34.20	
City Maple Heights	State OH	Zip Code 44137-1432	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PA23

Full Name (Last, First, Middle Initial) of Payee Manns, Olori, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5202 Thomas St		Amount 34.20	
City Maple Heights	State OH	Zip Code 44137-1432	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PD12

(a) SUBTOTAL of Itemized Independent Expenditures.....	85.50
(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 Manns, Olori, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5202 Thomas St		Amount 34.20	
City Maple Heights	State OH	Zip Code 44137-1432	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Manns, Olori, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5202 Thomas St		Amount 34.20	
City Maple Heights	State OH	Zip Code 44137-1432	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mapp, Artez, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4509 N 19th St		Amount 91.91	
City Saint Louis	State MO	Zip Code 63107-1433	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	160.31
(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 Marasco, Daniel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5233 Stanton Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15201-2592	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NWB5
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Marasco, Daniel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5233 Stanton Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15201-2592	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NXG5
Name of Federal Candidate Supported or Opposed by Expenditure: McGinty, Kathleen, , ,		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 368876.35		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 Martin, Katherine, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 500 Karl Dr		Amount 34.20	
City Richmond Heights	State OH	Zip Code 44143-2544	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PAW9
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	171.00
(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 Martin, Katherine, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 500 Karl Dr		Amount 34.20	
City Richmond Heights	State OH	Zip Code 44143-2544	Transaction ID : VN7CZA6PDV7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Martin, Katherine, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 500 Karl Dr		Amount 34.20	
City Richmond Heights	State OH	Zip Code 44143-2544	Transaction ID : VN7CZA6PGT6
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Martin, Katherine, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 500 Karl Dr		Amount 34.20	
City Richmond Heights	State OH	Zip Code 44143-2544	Transaction ID : VN7CZA6PKS3
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Martinez, Ivelis, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8634 Suburban Dr		Amount 68.40	
City Orlando	State FL	Zip Code 32829-8694	Transaction ID : VN7CZA6P3M0
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: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Martinez, Ivelis, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8634 Suburban Dr		Amount 68.40	
City Orlando	State FL	Zip Code 32829-8694	Transaction ID : VN7CZA6P531
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mays, Tyrese, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1108 N 9th St		Amount 68.40	
City Saint Louis	State MO	Zip Code 63101-1004	Transaction ID : VN7CZA6RCF7
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: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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 Mazana, Tamuka, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1052 Providence Ln		Amount 68.40	
City Oviedo	State FL	Zip Code 32765-7040	Transaction ID : VN7CZA6P3R1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mazana, Tamuka, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1052 Providence Ln		Amount 68.40	
City Oviedo	State FL	Zip Code 32765-7040	Transaction ID : VN7CZA6P573
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McCain, Hope, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1389 E 171st St		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2525	Transaction ID : VN7CZA6P922
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 McCain, Hope, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1389 E 171st St		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2525	Transaction ID : VN7CZA6PC11
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McCain, Hope, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1389 E 171st St		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2525	Transaction ID : VN7CZA6PF09
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McCain, Hope, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1389 E 171st St		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2525	Transaction ID : VN7CZA6PHZ8
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 McCain, Marnetta, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 252 E 244th St Apt 206		Amount 34.20	
City Euclid	State OH	Zip Code 44123-1463	Transaction ID : VN7CZA6P9D9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee McCain, Marnetta, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 252 E 244th St Apt 206		Amount 34.20	
City Euclid	State OH	Zip Code 44123-1463	Transaction ID : VN7CZA6PCC8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee McCain, Marnetta, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 252 E 244th St Apt 206		Amount 34.20	
City Euclid	State OH	Zip Code 44123-1463	Transaction ID : VN7CZA6PFB6
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 McCain, Marnetta, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 252 E 244th St Apt 206		Amount 34.20	
City Euclid	State OH	Zip Code 44123-1463	Transaction ID : VN7CZA6PJA5
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McCallum, Hakeem, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1906 Buffalo Way		Amount 14.96	
City Durham	State NC	Zip Code 27704-4769	Transaction ID : VN7CZA6QH27
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McCallum, Hakeem, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1906 Buffalo Way		Amount 14.96	
City Durham	State NC	Zip Code 27704-4769	Transaction ID : VN7CZA6QJB8
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	64.12
(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 McCallum, Hakeem, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1906 Buffalo Way		Amount 14.96	
City Durham	State NC	Zip Code 27704-4769	Transaction ID : VN7CZA6QP68
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee McCallum, Hakeem, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1906 Buffalo Way		Amount 14.96	
City Durham	State NC	Zip Code 27704-4769	Transaction ID : VN7CZA6QQF2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee McCann, Jaclyn, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address PO Box 4896		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15206-0896	Transaction ID : VN7CZA6QWJ6
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.05
(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 McCann, Jaclyn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 4896		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15206-0896	
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6QWV7

Full Name (Last, First, Middle Initial) of Payee McCann, Jaclyn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 4896		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15206-0896	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6QXP0

Full Name (Last, First, Middle Initial) of Payee McCann, Jaclyn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 4896		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15206-0896	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6QXZ1

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.39
(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 McCarthy, Jamar, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 544 Knightsbridge way		Amount 17.10	
City Raleigh	State NC	Zip Code 27604	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McCarthy, Jamar, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 544 Knightsbridge way		Amount 17.10	
City Raleigh	State NC	Zip Code 27604	
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McCarthy, Jamar, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 544 Knightsbridge way		Amount 17.10	
City Raleigh	State NC	Zip Code 27604	
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
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee McCarthy, Jamar, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 544 Knightsbridge way		Amount 17.10	
City Raleigh	State NC	Zip Code 27604	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6Q5W5

Full Name (Last, First, Middle Initial) of Payee McCollum, Jodie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1311 Caldwell St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-2313	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QYS4

Full Name (Last, First, Middle Initial) of Payee McCollum, Jodie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1311 Caldwell St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-2313	
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6R010

(a) SUBTOTAL of Itemized Independent Expenditures.....	62.70
(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 McCollum, Jodie, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1311 Caldwell St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-2313	Transaction ID : VN7CZA6R3S6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee McCollum, Jodie, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1311 Caldwell St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-2313	Transaction ID : VN7CZA6R510
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee McCoy, Oshae, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 9722 8th PI SW Apt 118		Amount 68.40	
City Seattle	State WA	Zip Code 98106-3089	Transaction ID : VN7CZA6RBT1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(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 McCoy, Oshae, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 12.50	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA6RK60
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McCullough, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 27 Ridgeway Ave Apt C		Amount 13.97	
City Durham	State NC	Zip Code 27701-4638	Transaction ID : VN7CZA6QH85
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McCullough, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 27 Ridgeway Ave Apt C		Amount 13.97	
City Durham	State NC	Zip Code 27701-4638	Transaction ID : VN7CZA6QJH6
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	40.44
(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 McCullough, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 27 Ridgeway Ave Apt C		Amount 13.97	
City Durham	State NC	Zip Code 27701-4638	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QPC5

Full Name (Last, First, Middle Initial) of Payee McCullough, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 27 Ridgeway Ave Apt C		Amount 13.97	
City Durham	State NC	Zip Code 27701-4638	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QQN9

Full Name (Last, First, Middle Initial) of Payee McCullough, Sean, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 35253 Maplegrove Rd		Amount 34.20	
City Willoughby	State OH	Zip Code 44094-9690	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PAG4

(a) SUBTOTAL of Itemized Independent Expenditures.....	62.14
(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 McCullough, Sean, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 35253 Maplegrove Rd		Amount 34.20	
City Willoughby	State OH	Zip Code 44094-9690	Transaction ID : VN7CZA6PDF2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee McCullough, Sean, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 35253 Maplegrove Rd		Amount 34.20	
City Willoughby	State OH	Zip Code 44094-9690	Transaction ID : VN7CZA6PGE1
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee McCullough, Sean, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 35253 Maplegrove Rd		Amount 34.20	
City Willoughby	State OH	Zip Code 44094-9690	Transaction ID : VN7CZA6PKD8
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 McDaniel, Jason, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 658 SE 148th Ave		Amount 12.50	
City Portland	State OR	Zip Code 97233-2588	Transaction ID : VN7CZA6P2K1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee McDaniel, Jason, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 658 SE 148th Ave		Amount 12.50	
City Portland	State OR	Zip Code 97233-2588	Transaction ID : VN7CZA6P2N7
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee McDonald, Richard, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1365 Marlboro Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15221-2677	Transaction ID : VN7CZA6NW16
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	93.40
(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 McDonald, Richard, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1365 Marlboro Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15221-2677	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NX66

Full Name (Last, First, Middle Initial) of Payee McElrath, Trench, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6QY41

Full Name (Last, First, Middle Initial) of Payee McElrath, Trench, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6QZC5

(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 McElrath, Trench, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA6R341
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McElrath, Trench, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA6R4C7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McGee, Leron, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5932 Floy Ave		Amount 68.40	
City Saint Louis	State MO	Zip Code 63147-1106	Transaction ID : VN7CZA6RBZ0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(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 McGlothlan, Christian, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4107 E 189th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44122-6911	Transaction ID : VN7CZA6PBC5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee McGlothlan, Christian, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4107 E 189th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44122-6911	Transaction ID : VN7CZA6PEB3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee McGlothlan, Christian, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4107 E 189th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44122-6911	Transaction ID : VN7CZA6PHA2
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 McGlothlan, Christian, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4107 E 189th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44122-6911	Transaction ID : VN7CZA6PM99
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McLin, Maurice, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 9619 Ramona Blvd		Amount 34.20	
City Cleveland	State OH	Zip Code 44104-5350	Transaction ID : VN7CZA6PA65
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McLin, Maurice, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 9619 Ramona Blvd		Amount 34.20	
City Cleveland	State OH	Zip Code 44104-5350	Transaction ID : VN7CZA6PD53
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 McLin, Maurice, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 9619 Ramona Blvd		Amount 34.20	
City Cleveland	State OH	Zip Code 44104-5350	Transaction ID : VN7CZA6PG42
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McLin, Maurice, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 9619 Ramona Blvd		Amount 34.20	
City Cleveland	State OH	Zip Code 44104-5350	Transaction ID : VN7CZA6PK39
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee McMaster, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1221 Race St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19107-1618	Transaction ID : VN7CZA6NZ38
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 McMaster, Michael, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1221 Race St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19107-1618	
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: McGinty, Kathleen, , ,		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 : VN7CZA6P0Q7	

Full Name (Last, First, Middle Initial) of Payee McNary, Dericka, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4044 Shadywood Ln		Amount 34.20	
City Warrensville Heights	State OH	Zip Code 44122-6946	
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: Clinton, Hillary, , ,		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 : VN7CZA6PBS8	

Full Name (Last, First, Middle Initial) of Payee McNary, Dericka, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4044 Shadywood Ln		Amount 34.20	
City Warrensville Heights	State OH	Zip Code 44122-6946	
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: Trump, Donald, , ,		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 : VN7CZA6PER6	

(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 McNary, Dericka, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4044 Shadywood Ln		Amount 34.20	
City Warrensville Heights	State OH	Zip Code 44122-6946	Transaction ID : VN7CZA6PHQ5
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: Portman, Rob, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee McNary, Dericka, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4044 Shadywood Ln		Amount 34.20	
City Warrensville Heights	State OH	Zip Code 44122-6946	Transaction ID : VN7CZA6PMP2
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee McNeal, Constance, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 318 Gary St		Amount 5.34	
City Durham	State NC	Zip Code 27703-3110	Transaction ID : VN7CZA6QHX1
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: Burr, Richard, , ,		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		236458.09	

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.74
(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 McNeal, Constance, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 318 Gary St		Amount 5.34	
City Durham	State NC	Zip Code 27703-3110	Transaction ID : VN7CZA6QK62
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: Ross, Deborah, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee McNeal, Constance, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 318 Gary St		Amount 5.34	
City Durham	State NC	Zip Code 27703-3110	Transaction ID : VN7CZA6QQ11
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: Clinton, Hillary, , ,		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 1672274.44			

Full Name (Last, First, Middle Initial) of Payee McNeal, Constance, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 318 Gary St		Amount 5.34	
City Durham	State NC	Zip Code 27703-3110	Transaction ID : VN7CZA6QRA5
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: Trump, Donald, , ,		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 1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.02
(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 McNeil, Moniquea, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1018 Lockland Ave		Amount 22.80	
City Winston Salem	State NC	Zip Code 27103-4520	Transaction ID : VN7CZA6QZA9
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: Burr, Richard, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee McNeil, Moniquea, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1018 Lockland Ave		Amount 22.80	
City Winston Salem	State NC	Zip Code 27103-4520	Transaction ID : VN7CZA6R0J5
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: Ross, Deborah, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee McNeil, Moniquea, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1018 Lockland Ave		Amount 22.80	
City Winston Salem	State NC	Zip Code 27103-4520	Transaction ID : VN7CZA6R4A1
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: Clinton, Hillary, , ,		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		1672274.44	

(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 McNeil, Moniquea, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1018 Lockland Ave		Amount 22.80	
City Winston Salem	State NC	Zip Code 27103-4520	Transaction ID : VN7CZA6R5J5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Medina, Andrew, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PS00
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Medina, Andrew, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTJ3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Medina, Andrew, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PW48
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Medina, Andrew, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6XP1
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Medlock-Walton, Catherine, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1311 Shepherd St		Amount 38.00	
City Durham	State NC	Zip Code 27707-1646	Transaction ID : VN7CZA6QYB6
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	106.40
(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 Medlock-Walton, Catherine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1311 Shepherd St		Amount 38.00	
City Durham	State NC	Zip Code 27707-1646	Transaction ID : VN7CZA6QZK0
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Medlock-Walton, Catherine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1311 Shepherd St		Amount 38.00	
City Durham	State NC	Zip Code 27707-1646	Transaction ID : VN7CZA6R3B6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Medlock-Walton, Catherine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1311 Shepherd St		Amount 38.00	
City Durham	State NC	Zip Code 27707-1646	Transaction ID : VN7CZA6R4K2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(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 Mercado, Julio, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2046 W 47th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-4548	Transaction ID : VN7CZA6P9R4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mercado, Julio, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2046 W 47th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-4548	Transaction ID : VN7CZA6PCQ3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mercado, Julio, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2046 W 47th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-4548	Transaction ID : VN7CZA6PFP3
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Mercado, Julio, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2046 W 47th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44102-4548	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Merrill, Zachary, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 79.25	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Merrill, Zachary, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1005 NE 72nd St		Amount 12.50	
City Seattle	State WA	Zip Code 98115-5640	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	125.95
(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 Merritt, Toddrick, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 6907 Pine Ridge Dr		Amount 68.40	
City Saint Louis	State MO	Zip Code 63121-2733	Transaction ID : VN7CZA6RC73
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Full Name (Last, First, Middle Initial) of Payee Metivier, Day, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10949 Oberlin Rd		Amount 34.20	
City Oberlin	State OH	Zip Code 44074-9771	Transaction ID : VN7CZA6P9J7
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: Clinton, Hillary, , ,		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)	
		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Metivier, Day, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 10949 Oberlin Rd		Amount 34.20	
City Oberlin	State OH	Zip Code 44074-9771	Transaction ID : VN7CZA6PCH7
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: Trump, Donald, , ,		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)	
		1672274.44	

(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 Metivier, Day, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 10949 Oberlin Rd		Amount 34.20	
City Oberlin	State OH	Zip Code 44074-9771	Transaction ID : VN7CZA6PFG6
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: Portman, Rob, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Metivier, Day, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 10949 Oberlin Rd		Amount 34.20	
City Oberlin	State OH	Zip Code 44074-9771	Transaction ID : VN7CZA6PJF4
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Metobo, Diana, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2335 N Carlisle St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4515	Transaction ID : VN7CZA6NYN8
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: Clinton, Hillary, , ,		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		1672274.44	

(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 Metobo, Diana, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2335 N Carlisle St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4515	Transaction ID : VN7CZA6P096
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mickens, Kevin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 219 N Winebiddle St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15224-2461	Transaction ID : VN7CZA6NWP2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mickens, Kevin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 219 N Winebiddle St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15224-2461	Transaction ID : VN7CZA6NXV2
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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 Middleton, Vontravus, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1403 Autumn Rise Dr		Amount 17.10	
City Durham	State NC	Zip Code 27712	Transaction ID : VN7CZA6QH02
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Middleton, Vontravus, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1403 Autumn Rise Dr		Amount 17.10	
City Durham	State NC	Zip Code 27712	Transaction ID : VN7CZA6QJ92
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Middleton, Vontravus, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1403 Autumn Rise Dr		Amount 17.10	
City Durham	State NC	Zip Code 27712	Transaction ID : VN7CZA6QP42
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Middleton, Vontravus, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1403 Autumn Rise Dr		Amount 17.10	
City Durham	State NC	Zip Code 27712	Transaction ID : VN7CZA6QQD6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Milan, Dean, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 26 Southern Ave # 2		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15211-1928	Transaction ID : VN7CZA6NX17
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Milan, Dean, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 26 Southern Ave # 2		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15211-1928	Transaction ID : VN7CZA6NY69
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	153.90
(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 Miles, Carvelle, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7717 Hough Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-4176	Transaction ID : VN7CZA6PAQ9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Miles, Carvelle, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7717 Hough Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-4176	Transaction ID : VN7CZA6PDP8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Miles, Carvelle, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7717 Hough Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-4176	Transaction ID : VN7CZA6PGN6
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Miles, Carvelle, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7717 Hough Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-4176	Transaction ID : VN7CZA6PKM4
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Miles, Jazzmine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PRD0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Miles, Jazzmine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PSZ3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	126.12
(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 Miles, Jazzmine, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Miles, Jazzmine, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 45.96	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Miller, Jacqueline, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 403 Burns Ave		Amount 34.20	
City West Carrollton	State OH	Zip Code 45449-1333	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	126.12
(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 Miller, Jacqueline, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 403 Burns Ave		Amount 34.20	
City West Carrollton	State OH	Zip Code 45449-1333	Transaction ID : VN7CZA6NN03
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Miller, Jacqueline, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 403 Burns Ave		Amount 34.20	
City West Carrollton	State OH	Zip Code 45449-1333	Transaction ID : VN7CZA6NPN1
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Miller, Jacqueline, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 403 Burns Ave		Amount 34.20	
City West Carrollton	State OH	Zip Code 45449-1333	Transaction ID : VN7CZA6NRA8
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Mills, Odarius, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 265N Honey Springs Ave		Amount 17.10	
City Fuquay Varina	State NC	Zip Code 27526-6925	Transaction ID : VN7CZA6Q1G3
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mills, Odarius, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 265N Honey Springs Ave		Amount 17.10	
City Fuquay Varina	State NC	Zip Code 27526-6925	Transaction ID : VN7CZA6Q2G4
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mills, Odarius, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 265N Honey Springs Ave		Amount 17.10	
City Fuquay Varina	State NC	Zip Code 27526-6925	Transaction ID : VN7CZA6Q5G2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Mills, Odarius, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 265N Honey Springs Ave		Amount 17.10	
City Fuquay Varina	State NC	Zip Code 27526-6925	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6Q6G3
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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		1672274.44	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 Moodie, Kayci, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1920 73rd Ave		Amount 98.72	
City Philadelphia	State PA	Zip Code 19138-2711	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NZ62
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		1672274.44	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 Moodie, Kayci, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1920 73rd Ave		Amount 98.72	
City Philadelphia	State PA	Zip Code 19138-2711	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6P0T1
Name of Federal Candidate Supported or Opposed by Expenditure: McGinty, Kathleen, , ,		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		368876.35	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.....	▶	214.54
(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 Moore, Sandra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2623 Oakdale Ave		Amount 34.20	
City Lorain	State OH	Zip Code 44055-1061	Transaction ID : VN7CZA6P980
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moore, Sandra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2623 Oakdale Ave		Amount 34.20	
City Lorain	State OH	Zip Code 44055-1061	Transaction ID : VN7CZA6PC78
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moore, Sandra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2623 Oakdale Ave		Amount 34.20	
City Lorain	State OH	Zip Code 44055-1061	Transaction ID : VN7CZA6PF67
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Moore, Sandra, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2623 Oakdale Ave		Amount 34.20	
City Lorain	State OH	Zip Code 44055-1061	Transaction ID : VN7CZA6PJ55
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moore Goodwin, Deja, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45238-3434	Transaction ID : VN7CZA6PQV8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moore Goodwin, Deja, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45238-3434	Transaction ID : VN7CZA6PSD1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	126.12
(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 Moore Goodwin, Deja, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45238-3434	
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: Portman, Rob, , ,		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 : VN7CZA6PTZ6	

Full Name (Last, First, Middle Initial) of Payee Moore Goodwin, Deja, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 45.96	
City Cincinnati	State OH	Zip Code 45238-3434	
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: Strickland, Ted, , ,		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 : VN7CZA6PWH9	

Full Name (Last, First, Middle Initial) of Payee Moore, Kelly, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2016 Gorman St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19116-3914	
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: Clinton, Hillary, , ,		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 : VN7CZA6NZ20	

(a) SUBTOTAL of Itemized Independent Expenditures.....	160.32
(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 Moore, Kelly, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2016 Gorman St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19116-3914	Transaction ID : VN7CZA6P0P9
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moore, Nicole, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 136 E Lods St		Amount 38.60	
City Akron	State OH	Zip Code 44304-1108	Transaction ID : VN7CZA6PA15
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moore, Nicole, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 136 E Lods St		Amount 38.60	
City Akron	State OH	Zip Code 44304-1108	Transaction ID : VN7CZA6PD04
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	145.60
(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 Moore, Nicole, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 136 E Lods St		Amount 38.60	
City Akron	State OH	Zip Code 44304-1108	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moore, Nicole, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 136 E Lods St		Amount 38.60	
City Akron	State OH	Zip Code 44304-1108	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moorefield, Elizabeth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 513 N Cedar St		Amount 29.72	
City Greensboro	State NC	Zip Code 27401-1947	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	106.92
(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 Moorefield, Elizabeth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 513 N Cedar St		Amount 29.72	
City Greensboro	State NC	Zip Code 27401-1947	Transaction ID : VN7CZA6QZE0
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: Ross, Deborah, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Moorefield, Elizabeth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 513 N Cedar St		Amount 29.72	
City Greensboro	State NC	Zip Code 27401-1947	Transaction ID : VN7CZA6R366
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: Clinton, Hillary, , ,		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 1672274.44			

Full Name (Last, First, Middle Initial) of Payee Moorefield, Elizabeth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 513 N Cedar St		Amount 29.72	
City Greensboro	State NC	Zip Code 27401-1947	Transaction ID : VN7CZA6R4E2
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: Trump, Donald, , ,		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 1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	89.16
(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 Morales, Deraymus, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1583 Mccoy Road		Amount 68.40	
City	State	Zip Code	Transaction ID : VN7CZA6P3W3
Orlando	FL	32809	
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought:	House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		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)	
		2016	
94857.42			

Full Name (Last, First, Middle Initial) of Payee Morales, Deraymus, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1583 Mccoy Road		Amount 68.40	
City	State	Zip Code	Transaction ID : VN7CZA6P5B4
Orlando	FL	32809	
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought:	House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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)	
		2016	
1672274.44			

Full Name (Last, First, Middle Initial) of Payee Morales, Hope, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3721 W 166th St		Amount 34.20	
City	State	Zip Code	Transaction ID : VN7CZA6PBD3
Cleveland	OH	00000	
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought:	House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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)	
		2016	
1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Morales, Hope, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3721 W 166th St		Amount 34.20	
City Cleveland	State OH	Zip Code 00000	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PEC1

Full Name (Last, First, Middle Initial) of Payee Morales, Hope, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3721 W 166th St		Amount 34.20	
City Cleveland	State OH	Zip Code 00000	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PHB0

Full Name (Last, First, Middle Initial) of Payee Morales, Hope, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3721 W 166th St		Amount 34.20	
City Cleveland	State OH	Zip Code 00000	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PMA7

(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 Morgan, Robert, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 20121 Champ Dr		Amount 34.20	
City Euclid	State OH	Zip Code 44117-2208	Transaction ID : VN7CZA6PBM8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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, Robert, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 20121 Champ Dr		Amount 34.20	
City Euclid	State OH	Zip Code 44117-2208	Transaction ID : VN7CZA6PEK7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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, Robert, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 20121 Champ Dr		Amount 34.20	
City Euclid	State OH	Zip Code 44117-2208	Transaction ID : VN7CZA6PHJ5
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Morgan, Robert, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 20121 Champ Dr		Amount 34.20	
City Euclid	State OH	Zip Code 44117-2208	Transaction ID : VN7CZA6PMH3
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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, Slade, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5665 Hornaday Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27409-3166	Transaction ID : VN7CZA6QYH3
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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, Slade, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5665 Hornaday Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27409-3166	Transaction ID : VN7CZA6QZS7
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 Morgan, Slade, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5665 Hornaday Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27409-3166	Transaction ID : VN7CZA6R3H3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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, Slade, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5665 Hornaday Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27409-3166	Transaction ID : VN7CZA6R4S9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Morote, Cheyenne, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1944 Crestview Dr		Amount 17.10	
City Fayetteville	State NC	Zip Code 28304-5247	Transaction ID : VN7CZA6Q0T9
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	62.70
(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 Morote, Cheyenne, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1944 Crestview Dr		Amount 17.10	
City Fayetteville	State NC	Zip Code 28304-5247	Transaction ID : VN7CZA6Q1T2
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morote, Cheyenne, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1944 Crestview Dr		Amount 17.10	
City Fayetteville	State NC	Zip Code 28304-5247	Transaction ID : VN7CZA6Q4T9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morote, Cheyenne, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1944 Crestview Dr		Amount 17.10	
City Fayetteville	State NC	Zip Code 28304-5247	Transaction ID : VN7CZA6Q5T9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Morris, Dominique, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 29 S 5th St		Amount 68.40	
City Duquesne	State PA	Zip Code 15110-1204	Transaction ID : VN7CZA6NWW5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morris, Dominique, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 29 S 5th St		Amount 68.40	
City Duquesne	State PA	Zip Code 15110-1204	Transaction ID : VN7CZA6NY35
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morrow, Alaun, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4114 Quentin Blvd. Apt. 309		Amount 48.09	
City Gahanna	State OH	Zip Code 43230-1673	Transaction ID : VN7CZA6NK75
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	184.89
(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 Morrow, Alaun, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4114 Quentin Blvd. Apt. 309		Amount 48.09	
City Gahanna	State OH	Zip Code 43230-1673	Transaction ID : VN7CZA6NMW1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morrow, Alaun, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4114 Quentin Blvd. Apt. 309		Amount 48.09	
City Gahanna	State OH	Zip Code 43230-1673	Transaction ID : VN7CZA6NPH0
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morrow, Alaun, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4114 Quentin Blvd. Apt. 309		Amount 48.09	
City Gahanna	State OH	Zip Code 43230-1673	Transaction ID : VN7CZA6NR66
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	144.27
(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 Morton, Tina, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2424 S Holden Rd Apt J		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5740	Transaction ID : VN7CZA6QYK9
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morton, Tina, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2424 S Holden Rd Apt J		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5740	Transaction ID : VN7CZA6QZV3
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morton, Tina, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2424 S Holden Rd Apt J		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5740	Transaction ID : VN7CZA6R3K9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Morton, Tina, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2424 S Holden Rd Apt J		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5740	Transaction ID : VN7CZA6R4V5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mouton, Patrick, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	Transaction ID : VN7CZA6R8M7
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mouton, Patrick, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	Transaction ID : VN7CZA6R8S6
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 Mouton, Patrick, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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 : VN7CZA6R985
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Mouton, Patrick, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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 : VN7CZA6R9D4
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Mukenge, Ardi, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 147 Garden place Drive		Amount 24.23	
City Mebane	State NC	Zip Code 27302	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QZ26
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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 236458.09		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.....	▶	32.57
(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 Mukenge, Ardi, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 147 Garden place Drive		Amount 24.23	
City Mebane	State NC	Zip Code 27302	Transaction ID : VN7CZA6R0A2
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mukenge, Ardi, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 147 Garden place Drive		Amount 24.23	
City Mebane	State NC	Zip Code 27302	Transaction ID : VN7CZA6R428
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mukenge, Ardi, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 147 Garden place Drive		Amount 24.23	
City Mebane	State NC	Zip Code 27302	Transaction ID : VN7CZA6R5A2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.69
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Muldoon, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 9447 Firebush Dr		Amount 91.91	
City Saint Louis	State MO	Zip Code 63126-2837	Transaction ID : VN7CZA6RAW6
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: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Murray, James, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 19.81	
City Pittsburgh	State PA	Zip Code 15238-1420	Transaction ID : VN7CZA6QH69
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Murray, James, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 19.81	
City Pittsburgh	State PA	Zip Code 15238-1420	Transaction ID : VN7CZA6QJF0
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	131.53
(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 Murray, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 19.81	
City Pittsburgh	State PA	Zip Code 15238-1420	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QPA0
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Murray, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 19.81	
City Pittsburgh	State PA	Zip Code 15238-1420	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QQK3
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Murray, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15238-1420	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QWD6
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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 236458.09		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.....	▶	42.75
(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 Murray, James, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15238-1420	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QWP7
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09		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 Murray, James, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15238-1420	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QXH0
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> House <input type="checkbox"/> Senate	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Murray, James, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15238-1420	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QXT2
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> House <input type="checkbox"/> Senate	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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.....	9.39
(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 Murray, Nicholas, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1533 Marcus Ave		Amount 68.40	
City Saint Louis	State MO	Zip Code 63113-2231	Transaction ID : VN7CZA6RBA4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Myers, Allen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2516 Grimsley St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3134	Transaction ID : VN7CZA6QYE0
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Myers, Allen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2516 Grimsley St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3134	Transaction ID : VN7CZA6QZP4
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(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 Myers, Allen, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2516 Grimsley St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3134	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6R3E0
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Myers, Allen, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2516 Grimsley St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3134	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6R4P6
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Napoli, Nicholas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5211 Ville Maria Ln		Amount 68.40	
City Hazelwood	State MO	Zip Code 63042-1648	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6RCA7
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought 81793.49		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.....	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 Nappi, Julie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PRE8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nappi, Julie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PT01
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nappi, Julie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PVJ6
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Nappi, Julie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PX49
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nienhaus, Teresa, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2454 Delmar Ave		Amount 68.40	
City Granite City	State IL	Zip Code 62040-3426	Transaction ID : VN7CZA6RBX4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Norwood, Lloyd, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8561 Nc Highway 751		Amount 24.77	
City Durham	State NC	Zip Code 27713-6865	Transaction ID : VN7CZA6QHH6
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	127.37
(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 Norwood, Lloyd, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8561 Nc Highway 751		Amount 24.77	
City Durham	State NC	Zip Code 27713-6865	Transaction ID : VN7CZA6QJT7
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: Ross, Deborah, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Norwood, Lloyd, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8561 Nc Highway 751		Amount 24.77	
City Durham	State NC	Zip Code 27713-6865	Transaction ID : VN7CZA6QPNE
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: Clinton, Hillary, , ,		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 1672274.44			

Full Name (Last, First, Middle Initial) of Payee Norwood, Lloyd, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8561 Nc Highway 751		Amount 24.77	
City Durham	State NC	Zip Code 27713-6865	Transaction ID : VN7CZA6QQY0
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: Trump, Donald, , ,		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 1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.31
(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 Nourse, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4708 Cadmus Dr		Amount 49.53	
City Columbus	State OH	Zip Code 43228-8404	Transaction ID : VN7CZA6NKN3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nourse, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4708 Cadmus Dr		Amount 49.53	
City Columbus	State OH	Zip Code 43228-8404	Transaction ID : VN7CZA6NNA2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nourse, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4708 Cadmus Dr		Amount 49.53	
City Columbus	State OH	Zip Code 43228-8404	Transaction ID : VN7CZA6NPZ8
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	148.59
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Nourse, Steven, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4708 Cadmus Dr		Amount 49.53	
City Columbus	State OH	Zip Code 43228-8404	Transaction ID : VN7CZA6NRM7
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Olivo Martinez, Eladio, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6942 Keystone St Apt 2A		Amount 68.40	
City Philadelphia	State PA	Zip Code 19135-2040	Transaction ID : VN7CZA6NZ70
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Olivo Martinez, Eladio, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6942 Keystone St Apt 2A		Amount 68.40	
City Philadelphia	State PA	Zip Code 19135-2040	Transaction ID : VN7CZA6P0V9
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	186.33
(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 Olszewski, Shawn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 131 Harcourt Dr		Amount 34.20	
City Akron	State OH	Zip Code 44313-6508	Transaction ID : VN7CZA6P9A6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Olszewski, Shawn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 131 Harcourt Dr		Amount 34.20	
City Akron	State OH	Zip Code 44313-6508	Transaction ID : VN7CZA6PC94
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Olszewski, Shawn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 131 Harcourt Dr		Amount 34.20	
City Akron	State OH	Zip Code 44313-6508	Transaction ID : VN7CZA6PF83
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Olszewski, Shawn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 131 Harcourt Dr		Amount 34.20	
City Akron	State OH	Zip Code 44313-6508	Transaction ID : VN7CZA6PJ71
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ortiz, Aida, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5924 Auver Blvd		Amount 68.40	
City Orlando	State FL	Zip Code 32807-3764	Transaction ID : VN7CZA6P438
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ortiz, Aida, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5924 Auver Blvd		Amount 68.40	
City Orlando	State FL	Zip Code 32807-3764	Transaction ID : VN7CZA6P5J0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Oudiek, Solomon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 100 Oxford Dr Apt 909		Amount 68.40	
City Monroeville	State PA	Zip Code 15146-2480	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NWN4
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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) _____
		1672274.44	2016

Full Name (Last, First, Middle Initial) of Payee Oudiek, Solomon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 100 Oxford Dr Apt 909		Amount 68.40	
City Monroeville	State PA	Zip Code 15146-2480	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NXT4
Name of Federal Candidate Supported or Opposed by Expenditure: McGinty, Kathleen, , ,		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) _____
		368876.35	2016

Full Name (Last, First, Middle Initial) of Payee Outlaw, Corey, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7213 Lyndover Pl		Amount 68.40	
City Saint Louis	State MO	Zip Code 63143-2366	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6RAH9
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO 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) _____
		81793.49	2016

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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 Outlaw, Prasafany, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 900 Avalon Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4323	Transaction ID : VN7CZA6QYR7
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Outlaw, Prasafany, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 900 Avalon Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4323	Transaction ID : VN7CZA6R003
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Outlaw, Prasafany, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 900 Avalon Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4323	Transaction ID : VN7CZA6R3R9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Outlaw, Prasafany, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 900 Avalon Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4323	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6R503

Full Name (Last, First, Middle Initial) of Payee Owens, Lesche, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12001 Towa Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P9G1

Full Name (Last, First, Middle Initial) of Payee Owens, Lesche, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12001 Towa Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PCF1

(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 Owens, Lesche, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12001 Towa Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PFE0

Full Name (Last, First, Middle Initial) of Payee Owens, Lesche, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12001 Towa Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PJD8

Full Name (Last, First, Middle Initial) of Payee Pace, Angela, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2330 Wharton Ct		Amount 91.91	
City Florissant	State MO	Zip Code 63031-2840	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6RAG1

(a) SUBTOTAL of Itemized Independent Expenditures.....	160.31
(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 Palmer, Quentin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2124 Rossmoor Rd		Amount 34.20	
City Cleveland Heights	State OH	Zip Code 44118-2517	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PB75
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		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) _____
		1672274.44	2016

Full Name (Last, First, Middle Initial) of Payee Palmer, Quentin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2124 Rossmoor Rd		Amount 34.20	
City Cleveland Heights	State OH	Zip Code 44118-2517	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PE64
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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		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) _____
		1672274.44	2016

Full Name (Last, First, Middle Initial) of Payee Palmer, Quentin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2124 Rossmoor Rd		Amount 34.20	
City Cleveland Heights	State OH	Zip Code 44118-2517	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PH52
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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		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) _____
		897326.39	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 Palmer, Quentin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2124 Rossmoor Rd		Amount 34.20	
City Cleveland Heights	State OH	Zip Code 44118-2517	Transaction ID : VN7CZA6PM40
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Palmer, Richard, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 710 Armandale St		Amount 89.16	
City Pittsburgh	State PA	Zip Code 15212-4078	Transaction ID : VN7CZA6NVZ0
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Palmer, Richard, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 710 Armandale St		Amount 89.16	
City Pittsburgh	State PA	Zip Code 15212-4078	Transaction ID : VN7CZA6NX41
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: McGinty, Kathleen, , ,		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		368876.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	212.52
(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 Pannell, Erik, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1889 Maryland Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43219-2928	Transaction ID : VN7CZA6NKP1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Pannell, Erik, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1889 Maryland Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43219-2928	Transaction ID : VN7CZA6NKP9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Pannell, Erik, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1889 Maryland Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43219-2928	Transaction ID : VN7CZA6NNB9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Pannell, Erik, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1889 Maryland Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43219-2928	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NNC7
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 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 Pannell, Erik, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1889 Maryland Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43219-2928	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NQ06
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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		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 Pannell, Erik, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1889 Maryland Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43219-2928	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NQ14
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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		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.....	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 Pannell, Erik, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1889 Maryland Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43219-2928	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Pannell, Erik, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1889 Maryland Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43219-2928	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Parker, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3407 Angier Ave		Amount 17.10	
City Durham	State NC	Zip Code 27703-5103	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	85.50
(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 Parker, Michael, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3407 Angier Ave		Amount 17.10	
City Durham	State NC	Zip Code 27703-5103	Transaction ID : VN7CZA6QJE2
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Parker, Michael, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3407 Angier Ave		Amount 17.10	
City Durham	State NC	Zip Code 27703-5103	Transaction ID : VN7CZA6QP92
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Parker, Michael, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3407 Angier Ave		Amount 17.10	
City Durham	State NC	Zip Code 27703-5103	Transaction ID : VN7CZA6QQJ6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Pazos, Javier, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2531 Collins St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19125-1723	Transaction ID : VN7CZA6NZF3
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Pazos, Javier, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2531 Collins St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19125-1723	Transaction ID : VN7CZA6P132
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: McGinty, Kathleen, , ,		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		368876.35	

Full Name (Last, First, Middle Initial) of Payee Pelletier, Sylvia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4604 Eaglet Ln		Amount 68.40	
City Kissimmee	State FL	Zip Code 34746-6040	Transaction ID : VN7CZA6P3P6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <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: Murphy, Patrick, , ,		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		94857.42	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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 Pelletier, Sylvia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4604 Eaglet Ln		Amount 68.40	
City Kissimmee	State FL	Zip Code 34746-6040	Transaction ID : VN7CZA6P557
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Perkins, Rose, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PS58
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Perkins, Rose, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTQ3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <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 Perkins, Rose, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PW96
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Perkins, Rose, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PXV1
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Perry, Kenneth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 508 Belanger Ln		Amount 68.40	
City Traverse City	State MI	Zip Code 49684-6502	Transaction ID : VN7CZA6RCC3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		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 Perry, Sanka, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 419 W Vandalia Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-6619	Transaction ID : VN7CZA6QYY4
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Perry, Sanka, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 419 W Vandalia Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-6619	Transaction ID : VN7CZA6R060
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Perry, Sanka, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 419 W Vandalia Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-6619	Transaction ID : VN7CZA6R3Y6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Perry, Sanka, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 419 W Vandalia Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-6619	Transaction ID : VN7CZA6R560
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Peters, Jared, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7402 Blanding Dr		Amount 68.40	
City Saint Louis	State MO	Zip Code 63135-3446	Transaction ID : VN7CZA6R9Q3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Phillips, Russell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1550 Superior Ave E # 301		Amount 34.20	
City Cleveland	State OH	Zip Code 44114-2906	Transaction ID : VN7CZA6P9W6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	125.40
(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 Phillips, Russell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1550 Superior Ave E # 301		Amount 34.20	
City Cleveland	State OH	Zip Code 44114-2906	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PCV4
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Phillips, Russell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1550 Superior Ave E # 301		Amount 34.20	
City Cleveland	State OH	Zip Code 44114-2906	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PFT3
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Phillips, Russell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1550 Superior Ave E # 301		Amount 34.20	
City Cleveland	State OH	Zip Code 44114-2906	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PJS3
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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 897326.39		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 Phillips, Sashieka, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 858 Carver St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1010	Transaction ID : VN7CZA6NZK5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Phillips, Sashieka, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 858 Carver St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1010	Transaction ID : VN7CZA6P173
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Pirdy, Philip, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PR08
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Pirdy, Philip, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PSJ1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Pirdy, Philip, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PV46
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Pirdy, Philip, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PWP9
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Poe, Kathy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8525 SE Morrison St		Amount 68.40	
City Portland	State OR	Zip Code 97216-1225	Transaction ID : VN7CZA6R9V5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Poe, Kathy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8525 SE Morrison St		Amount 12.50	
City Portland	State OR	Zip Code 97216-1225	Transaction ID : VN7CZA6RJCS
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Pollard, Rebecca, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 446 Haymore Ave N		Amount 34.20	
City Worthington	State OH	Zip Code 43085-2445	Transaction ID : VN7CZA6NK34
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.10
(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 Pollard, Rebecca, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 446 Haymore Ave N		Amount 34.20	
City Worthington	State OH	Zip Code 43085-2445	Transaction ID : VN7CZA6NMR9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Pollard, Rebecca, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 446 Haymore Ave N		Amount 34.20	
City Worthington	State OH	Zip Code 43085-2445	Transaction ID : VN7CZA6NPD8
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Pollard, Rebecca, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 446 Haymore Ave N		Amount 34.20	
City Worthington	State OH	Zip Code 43085-2445	Transaction ID : VN7CZA6NR25
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Pond, Nathaniel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 24.77	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA6Q0Q6
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Pond, Nathaniel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 24.77	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA6Q1Q8
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Pond, Nathaniel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 24.77	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA6Q4Q5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.31
(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 Pond, Nathaniel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 24.77	
City Portland	State OR	Zip Code 97236-3342	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6Q5Q6
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Pond, Nathaniel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 3.13	
City Portland	State OR	Zip Code 97236-3342	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QBZ2
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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 236458.09		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 Pond, Nathaniel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 3.13	
City Portland	State OR	Zip Code 97236-3342	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QCD2
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09		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.....	31.03
(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 Pond, Nathaniel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 3.13	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA6QDQ4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Pond, Nathaniel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 3.13	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA6QE55
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Portis, Franche, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 961 E 78th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-2063	Transaction ID : VN7CZA6PBF9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <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 Portis, Franche, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 961 E 78th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-2063	Transaction ID : VN7CZA6PEE7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Portis, Franche, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 961 E 78th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-2063	Transaction ID : VN7CZA6PHD6
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Portis, Franche, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 961 E 78th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-2063	Transaction ID : VN7CZA6PMC3
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2117 N Hastings St		Amount 91.91	
City Orlando	State FL	Zip Code 32808-4810	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Transaction ID : VN7CZA6R9Z7

Full Name (Last, First, Middle Initial) of Payee Powers, Latasha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2117 N Hastings St		Amount 12.50	
City Orlando	State FL	Zip Code 32808-4810	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Transaction ID : VN7CZA6RJG6

Full Name (Last, First, Middle Initial) of Payee Presley, Wisdom, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1952 Elston St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2719	
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: Clinton, Hillary, , ,		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)	
		1672274.44	

Transaction ID : VN7CZA6NYS9

(a) SUBTOTAL of Itemized Independent Expenditures.....	172.81
(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 Presley, Wisdom, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1952 Elston St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2719	Transaction ID : VN7CZA6P0D8
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: McGinty, Kathleen, , ,		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		368876.35	

Full Name (Last, First, Middle Initial) of Payee Price, Darien, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7201 Wilmington		Amount 34.20	
City South Euclid	State OH	Zip Code 44121	Transaction ID : VN7CZA6PA57
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Price, Darien, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7201 Wilmington		Amount 34.20	
City South Euclid	State OH	Zip Code 44121	Transaction ID : VN7CZA6PD45
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: Trump, Donald, , ,		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		1672274.44	

(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 Price, Darien, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7201 Wilmington		Amount 34.20	
City South Euclid	State OH	Zip Code 44121	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PG34
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Price, Darien, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7201 Wilmington		Amount 34.20	
City South Euclid	State OH	Zip Code 44121	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PK21
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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 897326.39		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 Prophet, Gerald, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 : VN7CZA6PS18
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Prophet, Gerald, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTK1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Prophet, Gerald, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PW56
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Prophet, Gerald, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PXQ9
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Pulley, Clynesa, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 800 Carlisle St		Amount 17.10	
City Raleigh	State NC	Zip Code 27610-3702	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6Q1M5
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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		236458.09	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 Pulley, Clynesa, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 800 Carlisle St		Amount 17.10	
City Raleigh	State NC	Zip Code 27610-3702	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6Q2M6
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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		236458.09	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 Pulley, Clynesa, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 800 Carlisle St		Amount 17.10	
City Raleigh	State NC	Zip Code 27610-3702	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6Q5M2
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		1672274.44	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.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Pulley, Clynesa, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 800 Carlisle St		Amount 17.10	
City Raleigh	State NC	Zip Code 27610-3702	Transaction ID : VN7CZA6Q6M5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Putnam, Donna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1021 Bellows Ave		Amount 48.09	
City Columbus	State OH	Zip Code 43223-1517	Transaction ID : VN7CZA6NJE8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Putnam, Donna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1021 Bellows Ave		Amount 48.09	
City Columbus	State OH	Zip Code 43223-1517	Transaction ID : VN7CZA6NM33
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	113.28
(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 Putnam, Donna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1021 Bellows Ave		Amount 48.09	
City Columbus	State OH	Zip Code 43223-1517	Transaction ID : VN7CZA6NNR2
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: Portman, Rob, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Putnam, Donna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1021 Bellows Ave		Amount 48.09	
City Columbus	State OH	Zip Code 43223-1517	Transaction ID : VN7CZA6NQD9
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Quarles, Kevin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 29.72	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA6QZ75
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: Burr, Richard, , ,		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		236458.09	

(a) SUBTOTAL of Itemized Independent Expenditures.....	125.90
(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 Quarles, Kevin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 29.72	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA6R0F1
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: Ross, Deborah, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Quarles, Kevin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 29.72	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA6R477
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Quarles, Kevin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 29.72	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA6R5F1
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: Trump, Donald, , ,		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		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	89.16
(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 Quarrells, Tequilla, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 318 Garden St		Amount 68.40	
City Cahokia	State IL	Zip Code 62206-1534	Transaction ID : VN7CZA6RBP9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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 QuickTrip		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 11525 Dorsett Rd		Amount 18.21	
City Maryland Heights	State MO	Zip Code 63043-3444	Transaction ID : VN7CZA6RGT3
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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 QuickTrip		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 11525 Dorsett Rd		Amount 14.47	
City Maryland Heights	State MO	Zip Code 63043-3444	Transaction ID : VN7CZA6RGV1
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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.....	101.08
(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 QuickTrip		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 11525 Dorsett Rd		Amount 14.00	
City Maryland Heights	State MO	Zip Code 63043-3444	
Purpose of Expenditure Gas		Category/Type	Transaction ID : VN7CZA6RGW9
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> Senate	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee QuickTrip		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 11525 Dorsett Rd		Amount 16.12	
City Maryland Heights	State MO	Zip Code 63043-3444	
Purpose of Expenditure Gas		Category/Type	Transaction ID : VN7CZA6RGX6
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> Senate	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee QuickTrip		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 11525 Dorsett Rd		Amount 14.06	
City Maryland Heights	State MO	Zip Code 63043-3444	
Purpose of Expenditure Gas		Category/Type	Transaction ID : VN7CZA6RGY4
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> Senate	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	44.18
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Rana, Javed, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3737 Eskdale Dr		Amount 22.80	
City High Point	State NC	Zip Code 27260-3417	Transaction ID : VN7CZA6QYQ9
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: Burr, Richard, , ,		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 Rana, Javed, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3737 Eskdale Dr		Amount 22.80	
City High Point	State NC	Zip Code 27260-3417	Transaction ID : VN7CZA6QZZ5
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: Ross, Deborah, , ,		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 Rana, Javed, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3737 Eskdale Dr		Amount 22.80	
City High Point	State NC	Zip Code 27260-3417	Transaction ID : VN7CZA6R3Q1
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: Clinton, Hillary, , ,		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)	

(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 Rana, Javed, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3737 Eskdale Dr		Amount 22.80	
City High Point	State NC	Zip Code 27260-3417	Transaction ID : VN7CZA6R4Z5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Randall II, Frederick, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 423 Probasco St		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA6PQQ6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Randall II, Frederick, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 423 Probasco St		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA6PS99
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	116.96
(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 Randall II, Frederick, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 423 Probasco St		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-3204	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PTV4
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Randall II, Frederick, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 423 Probasco St		Amount 47.08	
City Cincinnati	State OH	Zip Code 45220-3204	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6PWD7
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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 897326.39		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 Reed, Cindy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 23116 39th Ave E		Amount 2.53	
City Spanaway	State WA	Zip Code 98387-6964	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA6P8Q5
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought 94857.42		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.....	96.69
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Reed, Cindy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 23116 39th Ave E		Amount 9.97	
City Spanaway	State WA	Zip Code 98387-6964	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6P8R3
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought 94857.42		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 Reed, Cindy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 23116 39th Ave E		Amount 9.97	
City Spanaway	State WA	Zip Code 98387-6964	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6P8S1
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		Office Sought: <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Reed, Cindy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 23116 39th Ave E		Amount 2.53	
City Spanaway	State WA	Zip Code 98387-6964	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6P8T9
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Office Sought: <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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.....	22.47
(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 Reid, Tina, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4417 Page Ave		Amount 68.40	
City Saint Louis	State MO	Zip Code 63113-2823	Transaction ID : VN7CZA6RBQ7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rembert, Craig, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3513 Wells St		Amount 68.40	
City Orlando	State FL	Zip Code 32805-4286	Transaction ID : VN7CZA6P385
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rembert, Craig, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3513 Wells St		Amount 68.40	
City Orlando	State FL	Zip Code 32805-4286	Transaction ID : VN7CZA6P4Q6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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 Render, Jasuia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7701 Camden Ave		Amount 39.67	
City Cleveland	State OH	Zip Code 44102-5024	Transaction ID : VN7CZA6P8Z9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Render, Jasuia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7701 Camden Ave		Amount 39.67	
City Cleveland	State OH	Zip Code 44102-5024	Transaction ID : VN7CZA6PBY7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Render, Jasuia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7701 Camden Ave		Amount 39.67	
City Cleveland	State OH	Zip Code 44102-5024	Transaction ID : VN7CZA6PEX6
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(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 Render, Jasuia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7701 Camden Ave		Amount 39.67	
City Cleveland	State OH	Zip Code 44102-5024	Transaction ID : VN7CZA6PHW4
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ricardo Cruz		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1502 N Kolin Ave Apt 1		Amount 76.95	
City Chicago	State IL	Zip Code 60651-1741	Transaction ID : VN7CZA6NV05
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: Kirk, Mark, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		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 Ricardo Cruz		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1502 N Kolin Ave Apt 1		Amount 76.95	
City Chicago	State IL	Zip Code 60651-1741	Transaction ID : VN7CZA6NVR5
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: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	193.57
(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 Richardson, Austin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3012 Vancroft St Apt 4		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15219-5042	Transaction ID : VN7CZA6NWR8
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Richardson, Austin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3012 Vancroft St Apt 4		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15219-5042	Transaction ID : VN7CZA6NXX8
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: McGinty, Kathleen, , ,		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		368876.35	

Full Name (Last, First, Middle Initial) of Payee Richardson, Chardo, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3011 S Semoran Blvd		Amount 77.20	
City Orlando	State FL	Zip Code 32822-2667	Transaction ID : VN7CZA6P3D4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <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: Murphy, Patrick, , ,		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		94857.42	

(a) SUBTOTAL of Itemized Independent Expenditures.....	214.00
(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 Richardson, Chardo, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3011 S Semoran Blvd		Amount 77.20	
City Orlando	State FL	Zip Code 32822-2667	Transaction ID : VN7CZA6P4W6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Richmond, Alexis, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2521 Barwick St		Amount 68.40	
City Orlando	State FL	Zip Code 32824-4207	Transaction ID : VN7CZA6P379
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Richmond, Alexis, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2521 Barwick St		Amount 68.40	
City Orlando	State FL	Zip Code 32824-4207	Transaction ID : VN7CZA6P4P8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	214.00
(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 Riner, Hayden, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 501 Angier Rd		Amount 17.10	
City Fuquay Varina	State NC	Zip Code 27526-2504	Transaction ID : VN7CZA6Q0X3
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Riner, Hayden, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 501 Angier Rd		Amount 17.10	
City Fuquay Varina	State NC	Zip Code 27526-2504	Transaction ID : VN7CZA6Q1X6
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Riner, Hayden, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 501 Angier Rd		Amount 17.10	
City Fuquay Varina	State NC	Zip Code 27526-2504	Transaction ID : VN7CZA6Q4X2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Riner, Hayden, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 501 Angier Rd		Amount 17.10	
City Fuquay Varina	State NC	Zip Code 27526-2504	Transaction ID : VN7CZA6Q5X3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rivera, Iris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7350 Westpointe Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32835-6192	Transaction ID : VN7CZA6P2S8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rivera, Iris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7350 Westpointe Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32835-6192	Transaction ID : VN7CZA6P488
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	85.50
(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 Rivera, Iris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7350 Westpointe Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32835-6192	Transaction ID : VN7CZA6P5Q9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rivera, Iris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7350 Westpointe Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32835-6192	Transaction ID : VN7CZA6P6A9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rivers, Christopher, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 17320 Judson Dr		Amount 34.20	
City Cleveland	State OH	Zip Code 44128-2245	Transaction ID : VN7CZA6PBA9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Rivers, Christopher, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 17320 Judson Dr		Amount 34.20	
City Cleveland	State OH	Zip Code 44128-2245	Transaction ID : VN7CZA6PE98
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rivers, Christopher, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 17320 Judson Dr		Amount 34.20	
City Cleveland	State OH	Zip Code 44128-2245	Transaction ID : VN7CZA6PH86
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rivers, Christopher, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 17320 Judson Dr		Amount 34.20	
City Cleveland	State OH	Zip Code 44128-2245	Transaction ID : VN7CZA6PM74
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Rivers, Kadijah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1053 Parkwood Dr		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-3678	Transaction ID : VN7CZA6PA49
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rivers, Kadijah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1053 Parkwood Dr		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-3678	Transaction ID : VN7CZA6PD37
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rivers, Kadijah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1053 Parkwood Dr		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-3678	Transaction ID : VN7CZA6PG26
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Rivers, Kadijah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1053 Parkwood Dr		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-3678	Transaction ID : VN7CZA6PK13
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: Strickland, Ted, , ,		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)	
		897326.39	

Full Name (Last, First, Middle Initial) of Payee Roane, Arleen, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3307 N Gratz St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19140-4924	Transaction ID : VN7CZA6NZY2
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: Clinton, Hillary, , ,		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)	
		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Roane, Arleen, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3307 N Gratz St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19140-4924	Transaction ID : VN7CZA6P1J0
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: McGinty, Kathleen, , ,		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)	
		368876.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Roberts, Orlando, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1801 Williamsburg Rd		Amount 17.10	
City Durham	State NC	Zip Code 27707-3543	Transaction ID : VN7CZA6QH43
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: Burr, Richard, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Roberts, Orlando, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1801 Williamsburg Rd		Amount 17.10	
City Durham	State NC	Zip Code 27707-3543	Transaction ID : VN7CZA6QJD4
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: Ross, Deborah, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Roberts, Orlando, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1801 Williamsburg Rd		Amount 17.10	
City Durham	State NC	Zip Code 27707-3543	Transaction ID : VN7CZA6QP84
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: Clinton, Hillary, , ,		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 1672274.44			

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Roberts, Orlando, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1801 Williamsburg Rd		Amount 17.10	
City Durham	State NC	Zip Code 27707-3543	Transaction ID : VN7CZA6QQH8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Robertson, Shelby, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2135 Charles St		Amount 17.10	
City Durham	State NC	Zip Code 27707-2907	Transaction ID : VN7CZA6QHD4
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Robertson, Shelby, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2135 Charles St		Amount 17.10	
City Durham	State NC	Zip Code 27707-2907	Transaction ID : VN7CZA6QJP5
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Robertson, Shelby, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2135 Charles St		Amount 17.10	
City Durham	State NC	Zip Code 27707-2907	Transaction ID : VN7CZA6QPH5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Robertson, Shelby, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2135 Charles St		Amount 17.10	
City Durham	State NC	Zip Code 27707-2907	Transaction ID : VN7CZA6QQT9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Robinson, Marceia, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 62 N 17th St		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1801	Transaction ID : VN7CZA6NJG4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Robinson, Marceia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 62 N 17th St		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1801	Transaction ID : VN7CZA6NM59
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Robinson, Marceia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 62 N 17th St		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1801	Transaction ID : VN7CZA6NNT8
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Robinson, Marceia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 62 N 17th St		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1801	Transaction ID : VN7CZA6NQF5
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Robinson, Michael, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4270 E 137th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-6408	Transaction ID : VN7CZA6PBJ2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Robinson, Michael, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4270 E 137th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-6408	Transaction ID : VN7CZA6PEH1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Robinson, Michael, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4270 E 137th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-6408	Transaction ID : VN7CZA6PHG9
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Robinson, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4270 E 137th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-6408	Transaction ID : VN7CZA6PMF7
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Robinson, Thomas, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PR23
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Robinson, Thomas, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PSM6
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: Trump, Donald, , ,		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		1672274.44	

(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 Robinson, Thomas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Robinson, Thomas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Robinson, Tyeisha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 460 W Earham Ter		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-4502	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Robinson, Tyeisha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 460 W Earlam Ter		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-4502	Transaction ID : VN7CZA6P1M6
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: McGinty, Kathleen, , ,		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		368876.35	

Full Name (Last, First, Middle Initial) of Payee Rodgers, Jaylen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2006 Lost Ln		Amount 17.10	
City Raleigh	State NC	Zip Code 27603-3973	Transaction ID : VN7CZA6Q115
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: Burr, Richard, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Rodgers, Jaylen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2006 Lost Ln		Amount 17.10	
City Raleigh	State NC	Zip Code 27603-3973	Transaction ID : VN7CZA6Q217
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: Ross, Deborah, , ,		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		236458.09	

(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 Rodgers, Jaylen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2006 Lost Ln		Amount 17.10	
City Raleigh	State NC	Zip Code 27603-3973	Transaction ID : VN7CZA6Q514
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rodgers, Jaylen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2006 Lost Ln		Amount 17.10	
City Raleigh	State NC	Zip Code 27603-3973	Transaction ID : VN7CZA6Q615
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rosales, Maria, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 237 Somerset Dr		Amount 34.20	
City Davenport	State FL	Zip Code 33897-6235	Transaction ID : VN7CZA6P3Y9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		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 Rosales, Maria, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 237 Somerset Dr		Amount 34.20	
City Davenport	State FL	Zip Code 33897-6235	Transaction ID : VN7CZA6P5D0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: FL <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: Murphy, Patrick, , ,		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		94857.42	

Full Name (Last, First, Middle Initial) of Payee Rosales, Maria, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 237 Somerset Dr		Amount 34.20	
City Davenport	State FL	Zip Code 33897-6235	Transaction ID : VN7CZA6P642
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Rosales, Maria, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 237 Somerset Dr		Amount 34.20	
City Davenport	State FL	Zip Code 33897-6235	Transaction ID : VN7CZA6P6Q0
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: Trump, Donald, , ,		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		1672274.44	

(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 Rose, Jeanette, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5590 Gary Ave		Amount 34.20	
City Bedford	State OH	Zip Code 44146-2453	Transaction ID : VN7CZA6P9S2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rose, Jeanette, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5590 Gary Ave		Amount 34.20	
City Bedford	State OH	Zip Code 44146-2453	Transaction ID : VN7CZA6PCR1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rose, Jeanette, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5590 Gary Ave		Amount 34.20	
City Bedford	State OH	Zip Code 44146-2453	Transaction ID : VN7CZA6PFQ1
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Rose, Jeanette, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5590 Gary Ave		Amount 34.20	
City Bedford	State OH	Zip Code 44146-2453	Transaction ID : VN7CZA6PJP0
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rosclair, Kenny, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 17.10	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6Q1B4
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rosclair, Kenny, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 17.10	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6Q2B6
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		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 Rosclair, Kenny, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 17.10	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6Q5B3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rosclair, Kenny, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 17.10	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6Q6B4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rosclair, Kenny, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 3.13	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6QC75
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.33
(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 Rosclair, Kenny, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 3.13	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6QCN5
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rosclair, Kenny, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 3.13	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6QDZ7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rosclair, Kenny, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12101 Sterling University Ln		Amount 3.13	
City Orlando	State FL	Zip Code 32826-2235	Transaction ID : VN7CZA6QED8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.39
(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 Rowe-Watts, Corey, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 863 Ballard St Apt B		Amount 68.40	
City Altamonte Springs	State FL	Zip Code 32701-5766	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6P3H6
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought 94857.42		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 Rowe-Watts, Corey, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 863 Ballard St Apt B		Amount 68.40	
City Altamonte Springs	State FL	Zip Code 32701-5766	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6P507
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Ruge-Whitacre, Forest, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 17.10	
City Pittsburgh	State PA	Zip Code 15221-3510	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6Q1K7
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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 236458.09		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.....	153.90
(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 Ruge-Whitacre, Forest, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 17.10	
City Pittsburgh	State PA	Zip Code 15221-3510	Transaction ID : VN7CZA6Q2K8
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ruge-Whitacre, Forest, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 17.10	
City Pittsburgh	State PA	Zip Code 15221-3510	Transaction ID : VN7CZA6Q5K6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ruge-Whitacre, Forest, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 17.10	
City Pittsburgh	State PA	Zip Code 15221-3510	Transaction ID : VN7CZA6Q6K7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Ruge-Whitacre, Forest, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15221-3510	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QCC4
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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		236458.09	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 Ruge-Whitacre, Forest, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15221-3510	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QCT5
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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		236458.09	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 Ruge-Whitacre, Forest, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15221-3510	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QE47
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		1672274.44	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.....	9.39
(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 Ruge-Whitacre, Forest, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15221-3510	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QEJ7

Full Name (Last, First, Middle Initial) of Payee Ruiz, Luzmeilyn, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P2Q3

Full Name (Last, First, Middle Initial) of Payee Ruiz, Luzmeilyn, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P462

(a) SUBTOTAL of Itemized Independent Expenditures.....	97.25
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Ruiz, Luzmeilyn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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	Transaction ID : VN7CZA6P5N3
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Ruiz, Luzmeilyn, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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	Transaction ID : VN7CZA6P683
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Russell Spillman		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 613 E 33rd Pl		Amount 91.91	
City Chicago	State IL	Zip Code 60616-4143	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NTN8
Name of Federal Candidate Supported or Opposed by Expenditure: Kirk, Mark, , ,		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 102711.83		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.....	186.03
(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 Russell Spillman		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 613 E 33rd Pl		Amount 91.91	
City Chicago	State IL	Zip Code 60616-4143	
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: Duckworth, Tammy, , ,		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 : VN7CZA6NVD8	

Full Name (Last, First, Middle Initial) of Payee Russell, Leila, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1409 Flora Lee Dr		Amount 34.20	
City Leesburg	State FL	Zip Code 34748-3464	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		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 : VN7CZA6P3B9	

Full Name (Last, First, Middle Initial) of Payee Russell, Leila, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1409 Flora Lee Dr		Amount 34.20	
City Leesburg	State FL	Zip Code 34748-3464	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		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 : VN7CZA6P4T0	

(a) SUBTOTAL of Itemized Independent Expenditures.....	160.31
(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 Russell, Leila, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1409 Flora Lee Dr		Amount 34.20	
City Leesburg	State FL	Zip Code 34748-3464	Transaction ID : VN7CZA6P5X6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Russell, Leila, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1409 Flora Lee Dr		Amount 34.20	
City Leesburg	State FL	Zip Code 34748-3464	Transaction ID : VN7CZA6P6G5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ruybal, Camper, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12616 NE 79th St		Amount 3.13	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA6QWG0
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	71.53
(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 Ruybal, Camper, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12616 NE 79th St		Amount 3.13	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA6QWS1
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ruybal, Camper, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12616 NE 79th St		Amount 3.13	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA6QXM4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ruybal, Camper, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 12616 NE 79th St		Amount 3.13	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA6QXX5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.39
(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 Sadji, Yawo, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6658 Seahurst Dr		Amount 34.20	
City Canal Winchester	State OH	Zip Code 43110-9017	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NJP1
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Sadji, Yawo, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6658 Seahurst Dr		Amount 34.20	
City Canal Winchester	State OH	Zip Code 43110-9017	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NMB7
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Sadji, Yawo, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6658 Seahurst Dr		Amount 34.20	
City Canal Winchester	State OH	Zip Code 43110-9017	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NP05
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Sadi, Yawo, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 6658 Seahurst Dr		Amount 34.20	
City Canal Winchester	State OH	Zip Code 43110-9017	Transaction ID : VN7CZA6NQN2
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sakhara, Imhotep, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 325 Fern St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1811	Transaction ID : VN7CZA6NJ7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sakhara, Imhotep, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 325 Fern St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1811	Transaction ID : VN7CZA6P166
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Salter, Clinton, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3464 Domi Fitz Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32805-2038	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6P3F0
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought		94857.42	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 Salter, Clinton, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3464 Domi Fitz Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32805-2038	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6P4Y2
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought		94857.42	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 Salter, Clinton, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3464 Domi Fitz Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32805-2038	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6P5Z2
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		1672274.44	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 Salter, Clinton, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3464 Domi Fitz Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32805-2038	Transaction ID : VN7CZA6P6J0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 10 / 28 / 2016	
Mailing Address 7859 BS South Shore Dr. apt 3W		Amount 118.88	
City Chicago	State IL	Zip Code 60649	Transaction ID : VN7CZA6NTA2
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: Kirk, Mark, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Samuel Ortiz		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7859 BS South Shore Dr. apt 3W		Amount 118.88	
City Chicago	State IL	Zip Code 60649	Transaction ID : VN7CZA6NV21
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: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	271.96
(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 Sandy, Omu, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4341 Biscayne Ct		Amount 34.20	
City	State	Zip Code	Transaction ID : VN7CZA6NJS5
Gahanna	OH	43230-2000	
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: Clinton, Hillary, , ,		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) _____	
		2016	
1672274.44			

Full Name (Last, First, Middle Initial) of Payee Sandy, Omu, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4341 Biscayne Ct		Amount 34.20	
City	State	Zip Code	Transaction ID : VN7CZA6NME0
Gahanna	OH	43230-2000	
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: Trump, Donald, , ,		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	
1672274.44			

Full Name (Last, First, Middle Initial) of Payee Sandy, Omu, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4341 Biscayne Ct		Amount 34.20	
City	State	Zip Code	Transaction ID : VN7CZA6NP39
Gahanna	OH	43230-2000	
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: Portman, Rob, , ,		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	
897326.39			

(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 Sandy, Omu, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4341 Biscayne Ct		Amount 34.20	
City Gahanna	State OH	Zip Code 43230-2000	Transaction ID : VN7CZA6NQR6
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Santos, Nick, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address Whisperwood Dr		Amount 24.77	
City Raleigh	State NC	Zip Code 27616	Transaction ID : VN7CZA6Q107
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Santos, Nick, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address Whisperwood Dr		Amount 24.77	
City Raleigh	State NC	Zip Code 27616	Transaction ID : VN7CZA6Q200
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	83.74
(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 Santos, Nick, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address Whisperwood Dr		Amount 24.77	
City Raleigh	State NC	Zip Code 27616	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6Q506
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Santos, Nick, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address Whisperwood Dr		Amount 24.77	
City Raleigh	State NC	Zip Code 27616	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6Q607
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 10 / 28 / 2016	
Mailing Address 638 N Saint Louis Ave		Amount 76.95	
City Chicago	State IL	Zip Code 60624-1365	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NTH7
Name of Federal Candidate Supported or Opposed by Expenditure: Kirk, Mark, , ,		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 102711.83		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.....	126.49
(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 Sarah Jackson		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 638 N Saint Louis Ave		Amount 76.95	
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: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		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 Sargent, Shaakira, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.35	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sargent, Shaakira, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.35	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.65
(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 Sargent, Shaakira, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.35	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sargent, Shaakira, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 47.35	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Scales, ZhaiRon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2308 Argyle Dr		Amount 48.09	
City Columbus	State OH	Zip Code 43219-1404	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	142.79
(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 Scales, ZhaiRon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2308 Argyle Dr		Amount 48.09	
City Columbus	State OH	Zip Code 43219-1404	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NM83
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Scales, ZhaiRon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2308 Argyle Dr		Amount 48.09	
City Columbus	State OH	Zip Code 43219-1404	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NNX2
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Scales, ZhaiRon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2308 Argyle Dr		Amount 48.09	
City Columbus	State OH	Zip Code 43219-1404	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NQJ8
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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 897326.39		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.....	144.27
(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 Scheunemann, Joshua, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 696 Simon Ave		Amount 89.16	
City Saint Paul	State MN	Zip Code 55117-5625	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Scheunemann, Joshua, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 696 Simon Ave		Amount 12.50	
City Saint Paul	State MN	Zip Code 55117-5625	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Schlosser, David, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3 Kingsland Dr		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15202-1419	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	170.06
(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 Schlosser, David, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3 Kingsland Dr		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15202-1419	Transaction ID : VN7CZA6NXD2
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: McGinty, Kathleen, , ,		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		368876.35	

Full Name (Last, First, Middle Initial) of Payee Scott, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6540 N Beechwood St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2506	Transaction ID : VN7CZA6NZP8
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Scott, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6540 N Beechwood St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2506	Transaction ID : VN7CZA6P1A7
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: McGinty, Kathleen, , ,		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		368876.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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 Scott, Shakiyla, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PS66
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Scott, Shakiyla, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTR1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Scott, Shakiyla, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PWA4
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Scott, Shakiyla, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PXW9
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Seigle, Jacob, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1207 Fieldhurst Dr		Amount 91.91	
City Ballwin	State MO	Zip Code 63011-4311	Transaction ID : VN7CZA6RBB2
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: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Serrin, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1730 Gurtler Ct		Amount 47.06	
City Orlando	State FL	Zip Code 32804-6427	Transaction ID : VN7CZA6P3K2
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: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	173.17
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Serrin, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1730 Gurtler Ct		Amount 47.06	
City Orlando	State FL	Zip Code 32804-6427	Transaction ID : VN7CZA6P523
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Serrin, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1730 Gurtler Ct		Amount 47.06	
City Orlando	State FL	Zip Code 32804-6427	Transaction ID : VN7CZA6P618
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Serrin, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1730 Gurtler Ct		Amount 47.06	
City Orlando	State FL	Zip Code 32804-6427	Transaction ID : VN7CZA6P6M6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.18
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Sexton, Kenneth, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 196 Crosswinds Dr		Amount 68.40	
City Arnold	State MO	Zip Code 63010-2018	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Transaction ID : VN7CZA6RB31

Full Name (Last, First, Middle Initial) of Payee Shafran, Aaron, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 22600 Rye Rd		Amount 34.20	
City Shaker Heights	State OH	Zip Code 44122-3048	
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: Clinton, Hillary, , ,		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)	
		1672274.44	

Transaction ID : VN7CZA6PAS5

Full Name (Last, First, Middle Initial) of Payee Shafran, Aaron, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 22600 Rye Rd		Amount 34.20	
City Shaker Heights	State OH	Zip Code 44122-3048	
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: Trump, Donald, , ,		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)	
		1672274.44	

Transaction ID : VN7CZA6PDR3

(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 Shafran, Aaron, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 22600 Rye Rd		Amount 34.20	
City Shaker Heights	State OH	Zip Code 44122-3048	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PGQ2
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Shafran, Aaron, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 22600 Rye Rd		Amount 34.20	
City Shaker Heights	State OH	Zip Code 44122-3048	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PKP9
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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 897326.39		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 Shaw, Rataka, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5621 Eagle Valley Dr		Amount 68.40	
City Saint Louis	State MO	Zip Code 63136-1142	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6RC08
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought 81793.49		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.....	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 Shell -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3337 Clifton Ave		Amount 31.27	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA6PYB7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shell -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3337 Clifton Ave		Amount 31.27	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA6PYR0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shell -Cincinnati		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3337 Clifton Ave		Amount 31.27	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA6PZ53
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	93.81
(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 Shell -Cincinnati		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3337 Clifton Ave		Amount 31.27	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA6PZJ3
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement 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 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 2.29	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA6P768
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement 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 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 2.98	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA6P776
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	36.54
(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 Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 2.42	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		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)	
		94857.42	

Transaction ID : VN7CZA6P784

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 2.35	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		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)	
		94857.42	

Transaction ID : VN7CZA6P792

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 9.03	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		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)	
		94857.42	

Transaction ID : VN7CZA6P7N7

(a) SUBTOTAL of Itemized Independent Expenditures.....	13.80
(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 Shell Express		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 11.76	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA6P7P5
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement 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 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 9.56	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA6P7Q3
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement 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 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 9.28	
City Orlando	State FL	Zip Code 32809-3716	Transaction ID : VN7CZA6P7R1
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	30.60
(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 Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 9.03	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA6P845
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 11.76	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA6P853
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 9.56	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA6P861
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....▶	30.35
(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 Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 9.28	
City Orlando	State FL	Zip Code 32809-3716	
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: Clinton, Hillary, , ,		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 2.29	
City Orlando	State FL	Zip Code 32809-3716	
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: Trump, Donald, , ,		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 Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 2.98	
City Orlando	State FL	Zip Code 32809-3716	
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: Trump, Donald, , ,		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.....	14.55
(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 Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 2.42	
City Orlando	State FL	Zip Code 32809-3716	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P8N0

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 2.35	
City Orlando	State FL	Zip Code 32809-3716	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6P8P8

Full Name (Last, First, Middle Initial) of Payee Shell-Boardman		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5135 Market St		Amount 8.18	
City Boardman	State OH	Zip Code 44512-2132	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PMY5

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.95
(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 Shell-Boardman		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5135 Market St		Amount 8.18	
City Boardman	State OH	Zip Code 44512-2132	
Purpose of Expenditure Gas		Category/Type	Transaction ID : VN7CZA6PNP5
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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)
		1672274.44	2016

Full Name (Last, First, Middle Initial) of Payee Shell-Boardman		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5135 Market St		Amount 8.18	
City Boardman	State OH	Zip Code 44512-2132	
Purpose of Expenditure Gas		Category/Type	Transaction ID : VN7CZA6PPE3
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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		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)
		897326.39	2016

Full Name (Last, First, Middle Initial) of Payee Shell-Boardman		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5135 Market St		Amount 8.18	
City Boardman	State OH	Zip Code 44512-2132	
Purpose of Expenditure Gas		Category/Type	Transaction ID : VN7CZA6PQ62
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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		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)
		897326.39	2016

(a) SUBTOTAL of Itemized Independent Expenditures.....	24.54
(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 Shepherd, Larry, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3333 Surperior Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44114-4122	Transaction ID : VN7CZA6PAK7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shepherd, Larry, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3333 Surperior Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44114-4122	Transaction ID : VN7CZA6PDJ6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shepherd, Larry, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3333 Surperior Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44114-4122	Transaction ID : VN7CZA6PGH4
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Shepherd, Larry, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3333 Surperior Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44114-4122	Transaction ID : VN7CZA6PKG2
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shepherd, Nandi, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1844 N 22nd St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19121-2111	Transaction ID : VN7CZA6NZC9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shepherd, Nandi, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1844 N 22nd St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19121-2111	Transaction ID : VN7CZA6P108
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Sherman, Matthew, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 917 Osage Ln		Amount 34.20	
City Wilmette	State IL	Zip Code 60091-1219	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PAN3
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Sherman, Matthew, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 917 Osage Ln		Amount 34.20	
City Wilmette	State IL	Zip Code 60091-1219	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PDM2
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Sherman, Matthew, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 917 Osage Ln		Amount 34.20	
City Wilmette	State IL	Zip Code 60091-1219	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PGK0
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Sherman, Matthew, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 917 Osage Ln		Amount 34.20	
City Wilmette	State IL	Zip Code 60091-1219	Transaction ID : VN7CZA6PKJ8
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shontavia Wade		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6946 S Jeffery Blvd Apt 1B		Amount 76.95	
City Chicago	State IL	Zip Code 60649-1587	Transaction ID : VN7CZA6NTT8
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: Kirk, Mark, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shontavia Wade		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6946 S Jeffery Blvd Apt 1B		Amount 76.95	
City Chicago	State IL	Zip Code 60649-1587	Transaction ID : VN7CZA6NVJ8
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: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 102711.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	188.10
(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 Shresth, Elina, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1226 Springfield Valley Rd		Amount 17.10	
City Morrisville	State NC	Zip Code 27560-6708	Transaction ID : VN7CZA6QHN7
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: Burr, Richard, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Shresth, Elina, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1226 Springfield Valley Rd		Amount 17.10	
City Morrisville	State NC	Zip Code 27560-6708	Transaction ID : VN7CZA6QJY8
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: Ross, Deborah, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Shresth, Elina, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1226 Springfield Valley Rd		Amount 17.10	
City Morrisville	State NC	Zip Code 27560-6708	Transaction ID : VN7CZA6QPS8
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: Clinton, Hillary, , ,		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		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Shresth, Elina, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1226 Springfield Valley Rd		Amount 17.10	
City Morrisville	State NC	Zip Code 27560-6708	Transaction ID : VN7CZA6QR22
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: Trump, Donald, , ,		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 Shresth, Shiva, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1226 Springfield Valley Rd		Amount 17.10	
City Morrisville	State NC	Zip Code 27560-6708	Transaction ID : VN7CZA6QHP5
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: Burr, Richard, , ,		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 Shresth, Shiva, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1226 Springfield Valley Rd		Amount 17.10	
City Morrisville	State NC	Zip Code 27560-6708	Transaction ID : VN7CZA6QJZ6
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: Ross, Deborah, , ,		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)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Shresth, Shiva, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1226 Springfield Valley Rd		Amount 17.10	
City Morrisville	State NC	Zip Code 27560-6708	Transaction ID : VN7CZA6QPT6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shresth, Shiva, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1226 Springfield Valley Rd		Amount 17.10	
City Morrisville	State NC	Zip Code 27560-6708	Transaction ID : VN7CZA6QR30
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Silas, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8150 Zoe Dr		Amount 68.40	
City Saint Louis	State MO	Zip Code 63134-2229	Transaction ID : VN7CZA6RB96
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		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 Simmons, Gianna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 89.16	
City New Florence	State PA	Zip Code 15944-8402	Transaction ID : VN7CZA6NW40
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Simmons, Gianna, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 89.16	
City New Florence	State PA	Zip Code 15944-8402	Transaction ID : VN7CZA6NX90
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Simmons, Isaiah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 7608 Santa Monica Ave		Amount 91.91	
City Saint Louis	State MO	Zip Code 63121-2108	Transaction ID : VN7CZA6RAN0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	270.23
(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 Simonian, Mychal, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 225 W Apsley St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-4218	Transaction ID : VN7CZA6NZZ9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Simonian, Mychal, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 225 W Apsley St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-4218	Transaction ID : VN7CZA6P1K8
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Simons, Christopher, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 731 York Ave		Amount 94.11	
City Swarthmore	State PA	Zip Code 19081	Transaction ID : VN7CZA6NZQ6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	230.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Simons, Christopher, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 731 York Ave		Amount 94.11	
City Swarthmore	State PA	Zip Code 19081	Transaction ID : VN7CZA6P1B5
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Smalls, Dorian, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 728 N 16th St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19130-2924	Transaction ID : VN7CZA6NZS2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Smalls, Dorian, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 728 N 16th St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19130-2924	Transaction ID : VN7CZA6P1D1
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	230.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Smart, Jessica, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1515 Bellevue Ave Apt 106		Amount 68.40	
City Seattle	State WA	Zip Code 98122-3673	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6RBV9
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought 81793.49		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 Smart, Jessica, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1515 Bellevue Ave Apt 106		Amount 12.50	
City Seattle	State WA	Zip Code 98122-3673	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6RK44
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought 81793.49		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 Smiley, Otha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 : VN7CZA6PQY2
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	115.10
(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 Smiley, Otha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PSG5

Full Name (Last, First, Middle Initial) of Payee Smiley, Otha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PV20

Full Name (Last, First, Middle Initial) of Payee Smiley, Otha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6PWM3

(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 Smith, Iyasha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 16025 Lake Shore Blvd		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-1080	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PBH4
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Smith, Iyasha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 16025 Lake Shore Blvd		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-1080	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PEG3
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Smith, Iyasha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 16025 Lake Shore Blvd		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-1080	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PHF1
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Smith, Iyasha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 16025 Lake Shore Blvd		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-1080	Transaction ID : VN7CZA6PME9
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Smith, Mark, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2419 Walton Rd		Amount 68.40	
City Overland	State MO	Zip Code 63114-5124	Transaction ID : VN7CZA6RBY2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <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: Kander, Jason, , ,		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		81793.49	

Full Name (Last, First, Middle Initial) of Payee Smith, Sonya, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address PO Box 1202		Amount 22.80	
City Greensboro	State NC	Zip Code 27402-1202	Transaction ID : VN7CZA6QYW8
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: Burr, Richard, , ,		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		236458.09	

(a) SUBTOTAL of Itemized Independent Expenditures.....	125.40
(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 Smith, Sonya, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 1202		Amount 22.80	
City Greensboro	State NC	Zip Code 27402-1202	Transaction ID : VN7CZA6R044
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: Ross, Deborah, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Smith, Sonya, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 1202		Amount 22.80	
City Greensboro	State NC	Zip Code 27402-1202	Transaction ID : VN7CZA6R3W0
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Smith, Sonya, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address PO Box 1202		Amount 22.80	
City Greensboro	State NC	Zip Code 27402-1202	Transaction ID : VN7CZA6R544
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: Trump, Donald, , ,		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		1672274.44	

(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 Smith, Teraya, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4417 Glenview Rd		Amount 34.20	
City Warrensville Heights	State OH	Zip Code 44128-3523	Transaction ID : VN7CZA6PB00
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Smith, Teraya, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4417 Glenview Rd		Amount 34.20	
City Warrensville Heights	State OH	Zip Code 44128-3523	Transaction ID : VN7CZA6PDZ9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Smith, Teraya, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4417 Glenview Rd		Amount 34.20	
City Warrensville Heights	State OH	Zip Code 44128-3523	Transaction ID : VN7CZA6PGY7
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Smith, Teraya, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4417 Glenview Rd		Amount 34.20	
City Warrensville Heights	State OH	Zip Code 44128-3523	Transaction ID : VN7CZA6PKX5
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Smith, Timothy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 107 Shoals Ln		Amount 17.10	
City Garner	State NC	Zip Code 27529-4825	Transaction ID : VN7CZA6Q1E7
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: Burr, Richard, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Smith, Timothy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 107 Shoals Ln		Amount 17.10	
City Garner	State NC	Zip Code 27529-4825	Transaction ID : VN7CZA6Q2E0
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: Ross, Deborah, , ,		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		236458.09	

(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 Smith, Timothy, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 107 Shoals Ln		Amount 17.10	
City Garner	State NC	Zip Code 27529-4825	Transaction ID : VN7CZA6Q5E7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Smith, Timothy, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 107 Shoals Ln		Amount 17.10	
City Garner	State NC	Zip Code 27529-4825	Transaction ID : VN7CZA6Q6E7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Soles, Cortney, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 809 Macedonia Ct		Amount 22.80	
City High Point	State NC	Zip Code 27260-7234	Transaction ID : VN7CZA6QYX6
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	57.00
(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 Soles, Cortney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 809 Macedonia Ct		Amount 22.80	
City High Point	State NC	Zip Code 27260-7234	Transaction ID : VN7CZA6R052
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Soles, Cortney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 809 Macedonia Ct		Amount 22.80	
City High Point	State NC	Zip Code 27260-7234	Transaction ID : VN7CZA6R3X8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Soles, Cortney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 809 Macedonia Ct		Amount 22.80	
City High Point	State NC	Zip Code 27260-7234	Transaction ID : VN7CZA6R552
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Sosa, Lisa, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3663 Cook Ave Apt B		Amount 89.16	
City Saint Louis	State MO	Zip Code 63113-3801	Transaction ID : VN7CZA6RAY2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <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: Kander, Jason, , ,		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 81793.49			

Full Name (Last, First, Middle Initial) of Payee Spates, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1234 Hamilton Ct		Amount 5.34	
City Cary	State NC	Zip Code 27511-4987	Transaction ID : VN7CZA6Q1N3
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: Burr, Richard, , ,		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 236458.09			

Full Name (Last, First, Middle Initial) of Payee Spates, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1234 Hamilton Ct		Amount 5.34	
City Cary	State NC	Zip Code 27511-4987	Transaction ID : VN7CZA6Q2N3
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: Ross, Deborah, , ,		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 236458.09			

(a) SUBTOTAL of Itemized Independent Expenditures.....	99.84
(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 Spates, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1234 Hamilton Ct		Amount 5.34	
City Cary	State NC	Zip Code 27511-4987	Transaction ID : VN7CZA6Q5N0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Spates, Anthony, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1234 Hamilton Ct		Amount 5.34	
City Cary	State NC	Zip Code 27511-4987	Transaction ID : VN7CZA6Q6N3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Speciale, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 9 Brad St		Amount 29.72	
City Asheville	State NC	Zip Code 28803-1607	Transaction ID : VN7CZA6QZ18
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	40.40
(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 Speciale, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 9 Brad St		Amount 29.72	
City Asheville	State NC	Zip Code 28803-1607	
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6R094

Full Name (Last, First, Middle Initial) of Payee Speciale, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 9 Brad St		Amount 29.72	
City Asheville	State NC	Zip Code 28803-1607	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6R410

Full Name (Last, First, Middle Initial) of Payee Speciale, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 9 Brad St		Amount 29.72	
City Asheville	State NC	Zip Code 28803-1607	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6R594

(a) SUBTOTAL of Itemized Independent Expenditures.....	89.16
(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 Speedway 0006984		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1470 US 70 Hwy W		Amount 4.50	
City Garner	State NC	Zip Code 27529-2552	Transaction ID : VN7CZA6Q810
Purpose of Expenditure Gas	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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 0006984		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1470 US 70 Hwy W		Amount 2.65	
City Garner	State NC	Zip Code 27529-2552	Transaction ID : VN7CZA6Q828
Purpose of Expenditure Gas	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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 0006984		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1470 US 70 Hwy W		Amount 4.50	
City Garner	State NC	Zip Code 27529-2552	Transaction ID : VN7CZA6Q8Q4
Purpose of Expenditure Gas	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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	11.65
(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 Speedway 0006984		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1470 US 70 Hwy W		Amount 2.65	
City Garner	State NC	Zip Code 27529-2552	Transaction ID : VN7CZA6Q8R0
Purpose of Expenditure Gas	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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement 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 0006984		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1470 US 70 Hwy W		Amount 4.50	
City Garner	State NC	Zip Code 27529-2552	Transaction ID : VN7CZA6QAS3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement 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 0006984		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1470 US 70 Hwy W		Amount 2.65	
City Garner	State NC	Zip Code 27529-2552	Transaction ID : VN7CZA6QAT1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.80
(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 Speedway 0006984		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1470 US 70 Hwy W		Amount 4.50	
City	State	Zip Code	Transaction ID : VN7CZA6QBF7
Garner	NC	27529-2552	
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: Trump, Donald, , ,		Check One:	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016	
1672274.44		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name (Last, First, Middle Initial) of Payee Speedway 0006984		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1470 US 70 Hwy W		Amount 2.65	
City	State	Zip Code	Transaction ID : VN7CZA6QBG5
Garner	NC	27529-2552	
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: Trump, Donald, , ,		Check One:	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016	
1672274.44		<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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 9.48	
City	State	Zip Code	Transaction ID : VN7CZA6NS02
Columbus	OH	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: Clinton, Hillary, , ,		Check One:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016	
1672274.44		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	16.63
(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 Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 6.27	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA6NS10
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 4.85	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA6NS28
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 4.62	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA6NS35
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....▶	15.74
(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 Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 9.48	
City Columbus	State OH	Zip Code 43212-2311	
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: Trump, Donald, , ,		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 : VN7CZA6NSB9	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 6.27	
City Columbus	State OH	Zip Code 43212-2311	
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: Trump, Donald, , ,		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 : VN7CZA6NSC7	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 4.85	
City Columbus	State OH	Zip Code 43212-2311	
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: Trump, Donald, , ,		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 : VN7CZA6NSD4	

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.60
(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 Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 4.62	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		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: Trump, Donald, , ,		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 1672274.44	

Transaction ID : VN7CZA6NSE2

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 9.48	
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: Portman, Rob, , ,		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 897326.39	

Transaction ID : VN7CZA6NSP6

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 6.27	
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: Portman, Rob, , ,		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 897326.39	

Transaction ID : VN7CZA6NSQ3

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.37
(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 Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 4.85	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NSR1

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 4.62	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NSS9

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 9.48	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NT10

(a) SUBTOTAL of Itemized Independent Expenditures.....	18.95
(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 Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 6.27	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NT28

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 4.85	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NT36

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1626 W 5th Ave		Amount 4.62	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NT44

(a) SUBTOTAL of Itemized Independent Expenditures.....	15.74
(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 Spencer, Brandon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 805 Chatham Ln		Amount 17.10	
City Raleigh	State NC	Zip Code 27610-1203	Transaction ID : VN7CZA6QHB8
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Spencer, Brandon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 805 Chatham Ln		Amount 17.10	
City Raleigh	State NC	Zip Code 27610-1203	Transaction ID : VN7CZA6QJM9
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Spencer, Brandon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 805 Chatham Ln		Amount 17.10	
City Raleigh	State NC	Zip Code 27610-1203	Transaction ID : VN7CZA6QPF9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Spencer, Brandon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 805 Chatham Ln		Amount 17.10	
City Raleigh	State NC	Zip Code 27610-1203	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <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 Staybridge Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
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: Ross, Deborah, , ,		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 : VN7CZA6Q8C7	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
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: Ross, Deborah, , ,		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 : VN7CZA6Q8D5	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
Purpose of Expenditure Lodging		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: Clinton, Hillary, , ,		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 : VN7CZA6QAF4	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.39
(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 Staybridge Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.39
(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 Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
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: Burr, Richard, , ,		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 : VN7CZA6QS64	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
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: Burr, Richard, , ,		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 : VN7CZA6QS72	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
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: Burr, Richard, , ,		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 : VN7CZA6QS80	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.39
(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 Staybridge Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QS98
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QSA6
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QSB4
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.39
(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 Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
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: Burr, Richard, , ,		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 : VN7CZA6QSC2	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
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: Ross, Deborah, , ,		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 : VN7CZA6QSN3	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
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: Ross, Deborah, , ,		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 : VN7CZA6QSP1	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.39
(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 Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QSQ9
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	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QSR7
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	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QSS4
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	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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		236458.09	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.39
(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 Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QST2
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QSV0
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QSW8
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.39
(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 Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QSX6
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QV86
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QV94
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.39
(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 Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QVA2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QVB9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QVC7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	33.39
(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 Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QVD5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QVE3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QVF1
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.39
(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 Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QVG7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QVS8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QVT6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.39
(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 Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QVV4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QVW2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA6QVX0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.39
(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 Staybridge Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1012 Airport Blvd		Amount 11.13	
City Morrisville	State NC	Zip Code 27560-9195	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.39
(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 Steele, Kristy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1404 Larchmont Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2814	Transaction ID : VN7CZA6P9H9
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Steele, Kristy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1404 Larchmont Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2814	Transaction ID : VN7CZA6PCG9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Steele, Kristy, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1404 Larchmont Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2814	Transaction ID : VN7CZA6PFF8
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Steele, Kristy, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1404 Larchmont Rd		Amount 34.20	
City Cleveland	State OH	Zip Code 44110-2814	Transaction ID : VN7CZA6PJE6
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: Strickland, Ted, , ,		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)	
		897326.39	

Full Name (Last, First, Middle Initial) of Payee Stepnowski, Joseph, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 115 Saude Ave		Amount 68.40	
City Essington	State PA	Zip Code 19029-1414	Transaction ID : VN7CZA6P023
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: Clinton, Hillary, , ,		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)	
		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Stepnowski, Joseph, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 115 Saude Ave		Amount 68.40	
City Essington	State PA	Zip Code 19029-1414	Transaction ID : VN7CZA6P1P2
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: McGinty, Kathleen, , ,		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)	
		368876.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Stevenson, Robert, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 173 William Cir		Amount 68.40	
City Mc Kees Rocks	State PA	Zip Code 15136-2053	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NWZ3

Full Name (Last, First, Middle Initial) of Payee Stevenson, Robert, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 173 William Cir		Amount 68.40	
City Mc Kees Rocks	State PA	Zip Code 15136-2053	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NY43

Full Name (Last, First, Middle Initial) of Payee Style, Benjamin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2424 N 4th St		Amount 37.62	
City Columbus	State OH	Zip Code 43202-2707	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NK26

(a) SUBTOTAL of Itemized Independent Expenditures.....	174.42
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Style, Benjamin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2424 N 4th St		Amount 37.62	
City Columbus	State OH	Zip Code 43202-2707	Transaction ID : VN7CZA6NMQ1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Style, Benjamin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2424 N 4th St		Amount 37.62	
City Columbus	State OH	Zip Code 43202-2707	Transaction ID : VN7CZA6NPC0
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Style, Benjamin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2424 N 4th St		Amount 37.62	
City Columbus	State OH	Zip Code 43202-2707	Transaction ID : VN7CZA6NR17
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <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 Suggs, Katie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1962 Spring St		Amount 94.11	
City Winter Park	State FL	Zip Code 32792-1721	Transaction ID : VN7CZA6P3E2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <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: Murphy, Patrick, , ,		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 94857.42			

Full Name (Last, First, Middle Initial) of Payee Suggs, Katie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1962 Spring St		Amount 94.11	
City Winter Park	State FL	Zip Code 32792-1721	Transaction ID : VN7CZA6P4X4
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: Clinton, Hillary, , ,		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 1672274.44			

Full Name (Last, First, Middle Initial) of Payee Sullivan, Demetria, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2621 Camellia Dr		Amount 5.34	
City Durham	State NC	Zip Code 27705-2075	Transaction ID : VN7CZA6QH9
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: Burr, Richard, , ,		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 236458.09			

(a) SUBTOTAL of Itemized Independent Expenditures.....	193.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Sullivan, Demetria, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2621 Camellia Dr		Amount 5.34	
City Durham	State NC	Zip Code 27705-2075	Transaction ID : VN7CZA6QK79
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: Ross, Deborah, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Sullivan, Demetria, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2621 Camellia Dr		Amount 5.34	
City Durham	State NC	Zip Code 27705-2075	Transaction ID : VN7CZA6QQ29
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Sullivan, Demetria, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2621 Camellia Dr		Amount 5.34	
City Durham	State NC	Zip Code 27705-2075	Transaction ID : VN7CZA6QRB3
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: Trump, Donald, , ,		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		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.02
(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 Sunoco		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 100 W Queen Ln		Amount 18.77	
City Philadelphia	State PA	Zip Code 19144-6224	Transaction ID : VN7CZA6P276
Purpose of Expenditure Gas	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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sunoco		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 100 W Queen Ln		Amount 18.77	
City Philadelphia	State PA	Zip Code 19144-6224	Transaction ID : VN7CZA6P2J3
Purpose of Expenditure Gas	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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sweeney, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2528 Jay Ave # C		Amount 34.20	
City Cleveland	State OH	Zip Code 44113-3072	Transaction ID : VN7CZA6P930
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	71.74
(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 Sweeney, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2528 Jay Ave # C		Amount 34.20	
City Cleveland	State OH	Zip Code 44113-3072	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PC29

Full Name (Last, First, Middle Initial) of Payee Sweeney, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2528 Jay Ave # C		Amount 34.20	
City Cleveland	State OH	Zip Code 44113-3072	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PF17

Full Name (Last, First, Middle Initial) of Payee Sweeney, John, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2528 Jay Ave # C		Amount 34.20	
City Cleveland	State OH	Zip Code 44113-3072	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PJ06

(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 Tamara McWilliams		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5758 S Seeley Ave		Amount 76.95	
City Chicago	State IL	Zip Code 60636-1511	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NTW4
Name of Federal Candidate Supported or Opposed by Expenditure: Kirk, Mark, , ,		Office Sought: <input checked="" 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 102711.83		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 Tamara McWilliams		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5758 S Seeley Ave		Amount 76.95	
City Chicago	State IL	Zip Code 60636-1511	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6NVM3
Name of Federal Candidate Supported or Opposed by Expenditure: Duckworth, Tammy, , ,		Office Sought: <input checked="" 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 102711.83		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 Tarris, Marcel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2405 N Broadway		Amount 68.40	
City Saint Louis	State MO	Zip Code 63102-1503	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6R9T7
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought 81793.49		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.....	222.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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, Kyle, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1913 Sidney St Apt 2		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15203-1839	
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
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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, Kyle, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1913 Sidney St Apt 2		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15203-1839	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		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, Rob, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 12.50	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	149.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Telian, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 24.77	
City Pittsburgh	State PA	Zip Code 15224-1776	Transaction ID : VN7CZA6Q1J9
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Telian, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 24.77	
City Pittsburgh	State PA	Zip Code 15224-1776	Transaction ID : VN7CZA6Q2J0
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Telian, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 24.77	
City Pittsburgh	State PA	Zip Code 15224-1776	Transaction ID : VN7CZA6Q5J8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.31
(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 Telian, Michael, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 24.77	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6Q6J9

Full Name (Last, First, Middle Initial) of Payee Telian, Michael, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15224-1776	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QCB6

Full Name (Last, First, Middle Initial) of Payee Telian, Michael, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15224-1776	
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QCS7

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.03
(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 Telian, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15224-1776	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Telian, Michael, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 3.13	
City Pittsburgh	State PA	Zip Code 15224-1776	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thesing, Helena, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 109 Keith Ct		Amount 68.40	
City Winter Springs	State FL	Zip Code 32708-2479	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Thesing, Helena, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 109 Keith Ct		Amount 68.40	
City Winter Springs	State FL	Zip Code 32708-2479	Transaction ID : VN7CZA6P4E5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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, Dereck, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1114 Rebecca Ave		Amount 77.25	
City Braddock	State PA	Zip Code 15104-2672	Transaction ID : VN7CZA6NWF7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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, Dereck, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1114 Rebecca Ave		Amount 77.25	
City Braddock	State PA	Zip Code 15104-2672	Transaction ID : VN7CZA6NXM7
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	222.90
(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 Thomas, Omari, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 30.61	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QYC4
Name of Federal Candidate Supported or Opposed by Expenditure: Burr, Richard, , ,		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 236458.09		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, Omari, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 30.61	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QZM8
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09		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, Omari, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 30.61	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6R3C4
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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.....	91.83
(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 Thomas, Omari, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 30.61	
City Earth City	State MO	Zip Code 63045-1527	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6R4M0

Full Name (Last, First, Middle Initial) of Payee Thomas, Omari, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 4.17	
City Earth City	State MO	Zip Code 63045-1527	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6R8R9

Full Name (Last, First, Middle Initial) of Payee Thomas, Omari, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 4.17	
City Earth City	State MO	Zip Code 63045-1527	
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6R8X8

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.95
(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 Thomas, Omari, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 4.17	
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: Clinton, Hillary, , ,		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 : VN7CZA6R9C7

Full Name (Last, First, Middle Initial) of Payee Thomas, Omari, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 4.17	
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: Trump, Donald, , ,		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 : VN7CZA6R9H6

Full Name (Last, First, Middle Initial) of Payee Thomas, Rodney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 302 W Nedro Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1833	
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: Clinton, Hillary, , ,		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 : VN7CZA6NZ88

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.74
(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 Thomas, Rodney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 302 W Nedro Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1833	Transaction ID : VN7CZA6P0W7
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		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, Sharena, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1426 E 59th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-2538	Transaction ID : VN7CZA6PAZ2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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, Sharena, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1426 E 59th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-2538	Transaction ID : VN7CZA6PDY1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <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 Thomas, Sharena, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1426 E 59th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-2538	Transaction ID : VN7CZA6PGX9
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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, Sharena, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1426 E 59th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44103-2538	Transaction ID : VN7CZA6PKW7
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thompson, Carlhie, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 904 Timor Ave		Amount 68.40	
City Orlando	State FL	Zip Code 32804-1752	Transaction ID : VN7CZA6P393
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <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 Thompson, Carlhie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 904 Timor Ave		Amount 68.40	
City Orlando	State FL	Zip Code 32804-1752	Transaction ID : VN7CZA6P4R4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thompson, Jeremiah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2542 N Napa St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-2916	Transaction ID : VN7CZA6P031
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thompson, Jeremiah, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2542 N Napa St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-2916	Transaction ID : VN7CZA6P1Q0
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	205.20
(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 Thompson, Kenneth, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3207 Colquitt Rd		Amount 68.40	
City Shreveport	State LA	Zip Code 71118-3705	Transaction ID : VN7CZA6RCH2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <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: Kander, Jason, , ,		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 81793.49			

Full Name (Last, First, Middle Initial) of Payee Thompson, Linda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8235 Clarcona Ocoee Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32818-1271	Transaction ID : VN7CZA6P405
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <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: Rubio, Marco, , ,		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 94857.42			

Full Name (Last, First, Middle Initial) of Payee Thompson, Linda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8235 Clarcona Ocoee Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32818-1271	Transaction ID : VN7CZA6P5F6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <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: Murphy, Patrick, , ,		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 94857.42			

(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 Thompson, Linda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8235 Clarcona Ocoee Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32818-1271	Transaction ID : VN7CZA6P650
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thompson, Linda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 8235 Clarcona Ocoee Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32818-1271	Transaction ID : VN7CZA6P6R8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thoreau, Meghan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 598 E Como Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43202-1322	Transaction ID : VN7CZA6NKC5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Thoreau, Meghan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 598 E Como Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43202-1322	Transaction ID : VN7CZA6NN10
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: Trump, Donald, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Thoreau, Meghan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 598 E Como Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43202-1322	Transaction ID : VN7CZA6NPP9
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: Portman, Rob, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Thoreau, Meghan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 598 E Como Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43202-1322	Transaction ID : VN7CZA6NRB6
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: Strickland, Ted, , ,		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		897326.39	

(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 Tinsley, Diamond, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 10002 Daisy Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108	Transaction ID : VN7CZA6PBP4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tinsley, Diamond, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 10002 Daisy Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108	Transaction ID : VN7CZA6PEN2
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tinsley, Diamond, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 10002 Daisy Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108	Transaction ID : VN7CZA6PHM1
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Tinsley, Diamond, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 10002 Daisy Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108	Transaction ID : VN7CZA6PMK8
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Toles, Gordon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 534 Eiler St		Amount 68.40	
City Saint Louis	State MO	Zip Code 63111-1820	Transaction ID : VN7CZA6RAM3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tolliver, Red, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 131 Sturgeon St		Amount 34.20	
City Springfield	State OH	Zip Code 45506-3421	Transaction ID : VN7CZA6NKF8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Tolliver, Red, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 131 Sturgeon St		Amount 34.20	
City Springfield	State OH	Zip Code 45506-3421	Transaction ID : VN7CZA6NN44
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: Trump, Donald, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Tolliver, Red, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 131 Sturgeon St		Amount 34.20	
City Springfield	State OH	Zip Code 45506-3421	Transaction ID : VN7CZA6NPS1
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: Portman, Rob, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Tolliver, Red, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 131 Sturgeon St		Amount 34.20	
City Springfield	State OH	Zip Code 45506-3421	Transaction ID : VN7CZA6NRE0
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: Strickland, Ted, , ,		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		897326.39	

(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 Tolliver, Sharif, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 131 Sturgeon St		Amount 34.20	
City Springfield	State OH	Zip Code 45506-3421	Transaction ID : VN7CZA6NKG6
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Tolliver, Sharif, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 131 Sturgeon St		Amount 34.20	
City Springfield	State OH	Zip Code 45506-3421	Transaction ID : VN7CZA6NN52
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: Trump, Donald, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Tolliver, Sharif, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 131 Sturgeon St		Amount 34.20	
City Springfield	State OH	Zip Code 45506-3421	Transaction ID : VN7CZA6NPT9
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: Portman, Rob, , ,		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		897326.39	

(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 Tolliver, Sharif, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 131 Sturgeon St		Amount 34.20	
City Springfield	State OH	Zip Code 45506-3421	Transaction ID : VN7CZA6NRF7
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Torkelson, Thomas, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 3.13	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA6QC33
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Torkelson, Thomas, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 3.13	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA6QCH4
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <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 Torkelson, Thomas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 3.13	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QDV6

Full Name (Last, First, Middle Initial) of Payee Torkelson, Thomas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 3.13	
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QE96

Full Name (Last, First, Middle Initial) of Payee Torkelson, Thomas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 25.65	
City Earth City	State MO	Zip Code 63045-1527	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QHA1

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Torkelson, Thomas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 25.65	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QJK1
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		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 236458.09		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 Torkelson, Thomas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 25.65	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QPE1
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Torkelson, Thomas, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 25.65	
City Earth City	State MO	Zip Code 63045-1527	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6QQQ5
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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.....	76.95
(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 Totten, Ali, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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	Transaction ID : VN7CZA6NJD0
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Totten, Ali, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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	Transaction ID : VN7CZA6NM26
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Totten, Ali, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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	Transaction ID : VN7CZA6NNQ4
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Totten, Ali, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2091 Creekview Ct Apt C		Amount 34.20	
City Reynoldsburg	State OH	Zip Code 43068-4253	Transaction ID : VN7CZA6NQC1
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Towns, Charlie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 100 Brunson Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1758	Transaction ID : VN7CZA6NKS4
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Towns, Charlie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 100 Brunson Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1758	Transaction ID : VN7CZA6NNE3
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Towns, Charlie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 100 Brunson Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1758	Transaction ID : VN7CZA6NQ30
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: Portman, Rob, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Towns, Charlie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 100 Brunson Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1758	Transaction ID : VN7CZA6NRR9
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Townsend, Jonay, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5215 N Warnock St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19141-4025	Transaction ID : VN7CZA6NZ12
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: Clinton, Hillary, , ,		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		1672274.44	

(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 Townsend, Jonay, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5215 N Warnock St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19141-4025	Transaction ID : VN7CZA6P0N1
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: McGinty, Kathleen, , ,		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		368876.35	

Full Name (Last, First, Middle Initial) of Payee Trammell, Antoine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PQZ0
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Trammell, Antoine, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PSH3
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: Trump, Donald, , ,		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		1672274.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....	145.36
(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 Trammell, Antoine, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Trammell, Antoine, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Troup, Courtney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4106 Howley St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15224-1419	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	145.36
(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 Troup, Courtney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4106 Howley St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15224-1419	Transaction ID : VN7CZA6NX82
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Trutanich, Tina, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1300 N poplar st		Amount 22.80	
City Winston Salem	State NC	Zip Code 27101	Transaction ID : VN7CZA6QZ33
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Trutanich, Tina, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1300 N poplar st		Amount 22.80	
City Winston Salem	State NC	Zip Code 27101	Transaction ID : VN7CZA6R0B9
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(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 Trutanich, Tina, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1300 N poplar st		Amount 22.80	
City Winston Salem	State NC	Zip Code 27101	Transaction ID : VN7CZA6R435
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Trutanich, Tina, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1300 N poplar st		Amount 22.80	
City Winston Salem	State NC	Zip Code 27101	Transaction ID : VN7CZA6R5B9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tull, Christina, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 91 Kittanning Pike		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15215-1345	Transaction ID : VN7CZA6NW73
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(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 Tull, Christina, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 91 Kittanning Pike		Amount 68.40	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6NXC4

Full Name (Last, First, Middle Initial) of Payee Turner, Keith, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6P964

Full Name (Last, First, Middle Initial) of Payee Turner, Keith, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6PC52

(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 Turner, Keith, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1754 Lee Rd		Amount 34.20	
City Cleveland Hts	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA6PF41
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Turner, Keith, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1754 Lee Rd		Amount 34.20	
City Cleveland Hts	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA6PJ39
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ulbright, Karen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2992 SE Timberlake Dr		Amount 91.91	
City Hillsboro	State OR	Zip Code 97123-8377	Transaction ID : VN7CZA6RB15
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	160.31
(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 Ulbright, Karen, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2992 SE Timberlake Dr		Amount 12.50	
City Hillsboro	State OR	Zip Code 97123-8377	Transaction ID : VN7CZA6RJY7
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ulmer, Shuntell, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA6PR57
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ulmer, Shuntell, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA6PSQ0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	80.90
(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 Ulmer, Shuntell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ulmer, Shuntell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Umoyette, Jesse, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2436 Winding Hills Ct		Amount 49.53	
City Columbus	State OH	Zip Code 43224-3018	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	117.93
(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 Umoette, Jesse, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2436 Winding Hills Ct		Amount 49.53	
City Columbus	State OH	Zip Code 43224-3018	Transaction ID : VN7CZA6NMM8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Umoette, Jesse, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2436 Winding Hills Ct		Amount 49.53	
City Columbus	State OH	Zip Code 43224-3018	Transaction ID : VN7CZA6NP96
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Umoette, Jesse, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2436 Winding Hills Ct		Amount 49.53	
City Columbus	State OH	Zip Code 43224-3018	Transaction ID : VN7CZA6NQY3
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	148.59
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Ushry, Brandon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5120 Hawaiian Ter Apt 5		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1167	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PRA7
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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 1672274.44		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 Ushry, Brandon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5120 Hawaiian Ter Apt 5		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1167	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PSW0
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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 1672274.44		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 Ushry, Brandon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5120 Hawaiian Ter Apt 5		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1167	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PVE5
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Ushry, Brandon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5120 Hawaiian Ter Apt 5		Amount 34.20	
City Cincinnati	State OH	Zip Code 45223-1167	
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Vallejos, Ariston, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4727 SE Harrison St		Amount 68.40	
City Portland	State OR	Zip Code 97215-3241	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Vallejos, Ariston, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4727 SE Harrison St		Amount 12.50	
City Portland	State OR	Zip Code 97215-3241	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.10
(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 Van Jeffreys, Rodney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 130 Gussett Dr		Amount 17.10	
City Garner	State NC	Zip Code 27529-4376	Transaction ID : VN7CZA6Q148
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Van Jeffreys, Rodney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 130 Gussett Dr		Amount 17.10	
City Garner	State NC	Zip Code 27529-4376	Transaction ID : VN7CZA6Q241
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Van Jeffreys, Rodney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 130 Gussett Dr		Amount 17.10	
City Garner	State NC	Zip Code 27529-4376	Transaction ID : VN7CZA6Q548
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Van Jeffreys, Rodney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 130 Gussett Dr		Amount 17.10	
City Garner	State NC	Zip Code 27529-4376	Transaction ID : VN7CZA6Q648
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Vesser, Vincent, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 68.40	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA6R9W3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Vesser, Vincent, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3250 Rider Trl S		Amount 12.50	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA6RJE1
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	98.00
(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 Victoria Gill		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 134 W 107th St		Amount 91.91	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NTE3
Name of Federal Candidate Supported or Opposed by Expenditure: Kirk, Mark, , ,		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		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 Victoria Gill		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 134 W 107th St		Amount 91.91	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6NV63
Name of Federal Candidate Supported or Opposed by Expenditure: Duckworth, Tammy, , ,		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		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 Viehweger, AnnMarie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4841 Ute St		Amount 68.40	
City Orlando	State FL	Zip Code 32819-8452	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA6R9X1
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO 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)

(a) SUBTOTAL of Itemized Independent Expenditures.....	252.22
(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 Viehweger, AnnMarie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4841 Ute St		Amount 12.50	
City Orlando	State FL	Zip Code 32819-8452	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		81793.49	

Full Name (Last, First, Middle Initial) of Payee Vogler, Andrea, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 307 W 6th St		Amount 3.13	
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: Burr, Richard, , ,		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)	
		236458.09	

Full Name (Last, First, Middle Initial) of Payee Vogler, Andrea, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 307 W 6th St		Amount 3.13	
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: Ross, Deborah, , ,		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)	
		236458.09	

(a) SUBTOTAL of Itemized Independent Expenditures.....	18.76
(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 Vogler, Andrea, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 307 W 6th St		Amount 3.13	
City Royal Oak	State MI	Zip Code 48067-2548	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QDT8
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		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) ▶
		1672274.44	2016

Full Name (Last, First, Middle Initial) of Payee Vogler, Andrea, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 307 W 6th St		Amount 3.13	
City Royal Oak	State MI	Zip Code 48067-2548	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZA6QE88
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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		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) ▶
		1672274.44	2016

Full Name (Last, First, Middle Initial) of Payee Walker, Damon, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1949 Millvale Ct		Amount 47.08	
City Cincinnati	State OH	Zip Code 45225-1210	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6PR81
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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		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) ▶
		1672274.44	2016

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	53.34
(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 Walker, Damon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1949 Millvale Ct		Amount 47.08	
City Cincinnati	State OH	Zip Code 45225-1210	Transaction ID : VN7CZA6PST4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Walker, Damon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1949 Millvale Ct		Amount 47.08	
City Cincinnati	State OH	Zip Code 45225-1210	Transaction ID : VN7CZA6PVC9
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Walker, Damon, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1949 Millvale Ct		Amount 47.08	
City Cincinnati	State OH	Zip Code 45225-1210	Transaction ID : VN7CZA6PWY2
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	141.24
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Walker, Darnell, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1990 Ford Dr		Amount 34.20	
City Cleveland	State OH	Zip Code 44106-3900	Transaction ID : VN7CZA6P9T0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Walker, Darnell, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1990 Ford Dr		Amount 34.20	
City Cleveland	State OH	Zip Code 44106-3900	Transaction ID : VN7CZA6PCS8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Walker, Darnell, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1990 Ford Dr		Amount 34.20	
City Cleveland	State OH	Zip Code 44106-3900	Transaction ID : VN7CZA6PFR7
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Walker, Darnell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1990 Ford Dr		Amount 34.20	
City Cleveland	State OH	Zip Code 44106-3900	Transaction ID : VN7CZA6PJQ7
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Walker, Samantha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 851 E Godfrey Ave Apt 303		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1751	Transaction ID : VN7CZA6P047
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Walker, Samantha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 851 E Godfrey Ave Apt 303		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1751	Transaction ID : VN7CZA6P1R8
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Wallace, Arnecia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 7423 Sieloff Dr Apt A		Amount 89.16	
City Hazelwood	State MO	Zip Code 63042-2243	Transaction ID : VN7CZA6RAR4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Walls, Jr, L C, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2028 Hungerford Dr		Amount 68.40	
City Florissant	State MO	Zip Code 63031-2023	Transaction ID : VN7CZA6RBE6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Walsh, Alexander, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 100 McEntee St Apt 2		Amount 68.40	
City Kingston	State NY	Zip Code 12401-5956	Transaction ID : VN7CZA6NYV5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	225.96
(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 Walsh, Alexander, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 100 McEntee St Apt 2		Amount 68.40	
City Kingston	State NY	Zip Code 12401-5956	Transaction ID : VN7CZA6P0F4
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Walton, Chris, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PR31
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Walton, Chris, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PSN4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <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 Walton, Chris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 : VN7CZA6PV79
Name of Federal Candidate Supported or Opposed by Expenditure: Portman, Rob, , ,		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 897326.39		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 Walton, Chris, , ,		Date of Public Distribution/Dissemination 10 / 28 / 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 : VN7CZA6PWS2
Name of Federal Candidate Supported or Opposed by Expenditure: Strickland, Ted, , ,		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 897326.39		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 Warnusz, Margaret, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2315 Rutger St Apt C		Amount 68.40	
City Saint Louis	State MO	Zip Code 63104-2442	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA6RAK5
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: MO District: 00
Calendar Year-To-Date Per Election for Office Sought 81793.49		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.....	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 Washington, Shante, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12009 Saywell Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-3834	Transaction ID : VN7CZA6P9V8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Washington, Shante, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12009 Saywell Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-3834	Transaction ID : VN7CZA6PCT6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Washington, Shante, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12009 Saywell Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-3834	Transaction ID : VN7CZA6PFS5
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Washington, Shante, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 12009 Saywell Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-3834	Transaction ID : VN7CZA6PJR5
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Watt, Serroge, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 29.72	
City Saint Louis	State MO	Zip Code 63115-2031	Transaction ID : VN7CZA6QY74
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: Burr, Richard, , ,		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		236458.09	

Full Name (Last, First, Middle Initial) of Payee Watt, Serroge, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 29.72	
City Saint Louis	State MO	Zip Code 63115-2031	Transaction ID : VN7CZA6QZF8
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: Ross, Deborah, , ,		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		236458.09	

(a) SUBTOTAL of Itemized Independent Expenditures.....	93.64
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Watt, Serroge, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 29.72	
City Saint Louis	State MO	Zip Code 63115-2031	Transaction ID : VN7CZA6R374
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Watt, Serroge, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 29.72	
City Saint Louis	State MO	Zip Code 63115-2031	Transaction ID : VN7CZA6R4F0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Watt, Serroge, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2031	Transaction ID : VN7CZA6R8P3
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	63.61
(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 Watt, Serroge, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6R8V2

Full Name (Last, First, Middle Initial) of Payee Watt, Serroge, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6R9A1

Full Name (Last, First, Middle Initial) of Payee Watt, Serroge, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA6R9F0

(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 Wells, Rodney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3125 Utah Pl		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-3915	Transaction ID : VN7CZA6QYN3
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Wells, Rodney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3125 Utah Pl		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-3915	Transaction ID : VN7CZA6QZX9
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Wells, Rodney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3125 Utah Pl		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-3915	Transaction ID : VN7CZA6R3N5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Wells, Rodney, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3125 Utah Pl		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-3915	Transaction ID : VN7CZA6R4X9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Werner, Colleen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 678 24th Ave NE		Amount 68.40	
City Minneapolis	State MN	Zip Code 55418-3579	Transaction ID : VN7CZA6RBM3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Werner, Colleen, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 678 24th Ave NE		Amount 12.50	
City Minneapolis	State MN	Zip Code 55418-3579	Transaction ID : VN7CZA6RK29
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	103.70
(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 Wesner, Suphie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3006 Woodbury Rd		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-2441	Transaction ID : VN7CZA6P9N0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Wesner, Suphie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3006 Woodbury Rd		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-2441	Transaction ID : VN7CZA6PCM9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Wesner, Suphie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3006 Woodbury Rd		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-2441	Transaction ID : VN7CZA6PFK9
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Wesner, Suphie, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3006 Woodbury Rd		Amount 34.20	
City Shaker Hts	State OH	Zip Code 44120-2441	Transaction ID : VN7CZA6PJJ8
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee West Market Family Fare		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4700 W Market St		Amount 3.96	
City Greensboro	State NC	Zip Code 27407-1234	Transaction ID : VN7CZA6R621
Purpose of Expenditure Gas	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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee West Market Family Fare		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 4700 W Market St		Amount 4.76	
City Greensboro	State NC	Zip Code 27407-1234	Transaction ID : VN7CZA6R639
Purpose of Expenditure Gas	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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	42.92
(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 West Market Family Fare		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4700 W Market St		Amount 3.96	
City Greensboro	State NC	Zip Code 27407-1234	Transaction ID : VN7CZA6R6J8
Purpose of Expenditure Gas	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: Ross, Deborah, , ,		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 West Market Family Fare		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4700 W Market St		Amount 4.76	
City Greensboro	State NC	Zip Code 27407-1234	Transaction ID : VN7CZA6R6K5
Purpose of Expenditure Gas	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: Ross, Deborah, , ,		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 West Market Family Fare		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4700 W Market St		Amount 3.96	
City Greensboro	State NC	Zip Code 27407-1234	Transaction ID : VN7CZA6R825
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: Clinton, Hillary, , ,		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.....	12.68
(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 West Market Family Fare		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4700 W Market St		Amount 4.76	
City Greensboro	State NC	Zip Code 27407-1234	Transaction ID : VN7CZA6R833
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee West Market Family Fare		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4700 W Market St		Amount 3.96	
City Greensboro	State NC	Zip Code 27407-1234	Transaction ID : VN7CZA6R8J1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee West Market Family Fare		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4700 W Market St		Amount 4.76	
City Greensboro	State NC	Zip Code 27407-1234	Transaction ID : VN7CZA6R8K9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	13.48
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee West, Ethan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 403 Beall St		Amount 77.25	
City Cumberland	State MD	Zip Code 21502-3363	
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NWX5

Full Name (Last, First, Middle Initial) of Payee West, Ethan, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 403 Beall St		Amount 77.25	
City Cumberland	State MD	Zip Code 21502-3363	
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6NXN5

Full Name (Last, First, Middle Initial) of Payee West, Kioni, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1500 Meadston Dr		Amount 17.10	
City Durham	State NC	Zip Code 27712-9574	
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA6QHK2

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.60
(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 West, Kioni, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1500 Meadston Dr		Amount 17.10	
City Durham	State NC	Zip Code 27712-9574	Transaction ID : VN7CZA6QJW3
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee West, Kioni, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1500 Meadston Dr		Amount 17.10	
City Durham	State NC	Zip Code 27712-9574	Transaction ID : VN7CZA6QPQ2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee West, Kioni, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1500 Meadston Dr		Amount 17.10	
City Durham	State NC	Zip Code 27712-9574	Transaction ID : VN7CZA6QR06
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee West, Mitchell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 6333 N Rosebury Ave Apt 3W		Amount 89.16	
City Clayton	State MO	Zip Code 63105-2248	Transaction ID : VN7CZA6RB63
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee West, Monique, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3850 Woodhaven Rd Apt 1214		Amount 68.40	
City Philadelphia	State PA	Zip Code 19154-2745	Transaction ID : VN7CZA6NZ46
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee West, Monique, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3850 Woodhaven Rd Apt 1214		Amount 68.40	
City Philadelphia	State PA	Zip Code 19154-2745	Transaction ID : VN7CZA6P0R5
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: McGinty, Kathleen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 368876.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	225.96
(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 Weston, Crystal, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5101 Minnesota Ave Apt B		Amount 68.40	
City Saint Louis	State MO	Zip Code 63111-1759	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		2016	
		81793.49	

Transaction ID : VN7CZA6RC32

Full Name (Last, First, Middle Initial) of Payee Weston, Dayatra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3453 California Ave		Amount 68.40	
City Saint Louis	State MO	Zip Code 63118-3009	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		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)	
		2016	
		81793.49	

Transaction ID : VN7CZA6RBS3

Full Name (Last, First, Middle Initial) of Payee Wheeler, Rafit, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 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: Clinton, Hillary, , ,		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)	
		2016	
		1672274.44	

Transaction ID : VN7CZA6PRQ9

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Wheeler, Rafit, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PT92
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Wheeler, Rafit, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PVV7
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Wheeler, Rafit, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PXD0
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 White, Antonio, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2491 E 84th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44104-2207	Transaction ID : VN7CZA6PAJ0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee White, Antonio, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2491 E 84th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44104-2207	Transaction ID : VN7CZA6PDH8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee White, Antonio, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2491 E 84th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44104-2207	Transaction ID : VN7CZA6PGG7
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 White, Antonio, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2491 E 84th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44104-2207	Transaction ID : VN7CZA6PKF4
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Whittier, Shayolonda, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 335 Crawford Rd		Amount 91.91	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA6RA12
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Wiggins, Wade, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 109 Hillbrook Ct		Amount 17.10	
City Garner	State NC	Zip Code 27529-3711	Transaction ID : VN7CZA6Q0Z9
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	143.21
(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 Wiggins, Wade, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 109 Hillbrook Ct		Amount 17.10	
City Garner	State NC	Zip Code 27529-3711	Transaction ID : VN7CZA6Q1Z2
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Wiggins, Wade, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 109 Hillbrook Ct		Amount 17.10	
City Garner	State NC	Zip Code 27529-3711	Transaction ID : VN7CZA6Q4Z8
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Wiggins, Wade, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 109 Hillbrook Ct		Amount 17.10	
City Garner	State NC	Zip Code 27529-3711	Transaction ID : VN7CZA6Q5Z9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Wiley, Sharon, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4882 S Semoran Blvd Apt 1401		Amount 68.40	
City Orlando	State FL	Zip Code 32822-2360	Transaction ID : VN7CZA6P3Q3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Wiley, Sharon, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 4882 S Semoran Blvd Apt 1401		Amount 68.40	
City Orlando	State FL	Zip Code 32822-2360	Transaction ID : VN7CZA6P565
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Williams, Alexander, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 685 Carpenter St		Amount 34.20	
City Akron	State OH	Zip Code 44310-2967	Transaction ID : VN7CZA6PAM5
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Williams, Alexander, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 685 Carpenter St		Amount 34.20	
City Akron	State OH	Zip Code 44310-2967	Transaction ID : VN7CZA6PDK4
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Williams, Alexander, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 685 Carpenter St		Amount 34.20	
City Akron	State OH	Zip Code 44310-2967	Transaction ID : VN7CZA6PGJ2
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Williams, Alexander, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 685 Carpenter St		Amount 34.20	
City Akron	State OH	Zip Code 44310-2967	Transaction ID : VN7CZA6PKH0
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Williams, Britney, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3943 Mt Hermon Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44115-3328	Transaction ID : VN7CZA6PB91
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Williams, Britney, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3943 Mt Hermon Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44115-3328	Transaction ID : VN7CZA6PE80
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Williams, Britney, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3943 Mt Hermon Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44115-3328	Transaction ID : VN7CZA6PH78
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Williams, Britney, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3943 Mt Hermon Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44115-3328	Transaction ID : VN7CZA6PM66
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Williams, Carnell, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 809 Brighton St		Amount 21.38	
City Philadelphia	State PA	Zip Code 19111-4108	Transaction ID : VN7CZA6P063
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Williams, Carnell, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 809 Brighton St		Amount 21.38	
City Philadelphia	State PA	Zip Code 19111-4108	Transaction ID : VN7CZA6P1T4
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: McGinty, Kathleen, , ,		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		368876.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.96
(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 Williams, Darnell, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2700 Washington Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44113-2640	Transaction ID : VN7CZA6PAX6
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Williams, Darnell, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2700 Washington Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44113-2640	Transaction ID : VN7CZA6PDW5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Williams, Darnell, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2700 Washington Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44113-2640	Transaction ID : VN7CZA6PGV3
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Williams, Darnell, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2700 Washington Ave		Amount 34.20	
City Cleveland	State OH	Zip Code 44113-2640	Transaction ID : VN7CZA6PKT1
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Williams, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 323 N Horton St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19139-1121	Transaction ID : VN7CZA6P015
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: Clinton, Hillary, , ,		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		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Williams, James, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 323 N Horton St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19139-1121	Transaction ID : VN7CZA6P1N4
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: McGinty, Kathleen, , ,		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		368876.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	171.00
(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 Williams, Marisha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 638 Terrace Dr		Amount 68.40	
City East Saint Louis	State IL	Zip Code 62203-1670	Transaction ID : VN7CZA6RBR5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Williams, Rakell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1275 E 100th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-3502	Transaction ID : VN7CZA6P9Y2
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Williams, Rakell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1275 E 100th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-3502	Transaction ID : VN7CZA6PCX0
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <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 Williams, Rakell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1275 E 100th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-3502	Transaction ID : VN7CZA6PFW9
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Williams, Rakell, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1275 E 100th St		Amount 34.20	
City Cleveland	State OH	Zip Code 44108-3502	Transaction ID : VN7CZA6PJV9
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Williams, Robin, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 5100 Chingford Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43232-5314	Transaction ID : VN7CZA6NJT3
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Williams, Robin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5100 Chingford Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43232-5314	Transaction ID : VN7CZA6NMF8
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Williams, Robin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5100 Chingford Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43232-5314	Transaction ID : VN7CZA6NP47
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Williams, Robin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 5100 Chingford Rd		Amount 34.20	
City Columbus	State OH	Zip Code 43232-5314	Transaction ID : VN7CZA6NQS4
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Williams, Tyesha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3816 E 52nd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-3314	Transaction ID : VN7CZA6PA07
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Williams, Tyesha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3816 E 52nd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-3314	Transaction ID : VN7CZA6PCZ6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Williams, Tyesha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3816 E 52nd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-3314	Transaction ID : VN7CZA6PFY4
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Williams, Tyesha, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3816 E 52nd St		Amount 34.20	
City Cleveland	State OH	Zip Code 44105-3314	Transaction ID : VN7CZA6PJX2
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Wilson, Denzel, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 9990 Koester Springs Rd		Amount 68.40	
City French Village	State MO	Zip Code 63036-1004	Transaction ID : VN7CZA6RBG2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kander, Jason, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 81793.49		Disbursement For: <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 10 / 28 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA6P243
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	157.10
(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 Windsor Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA6P250
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: Clinton, Hillary, , ,		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) _____	
		2016	
		1672274.44	

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA6P2F9
Purpose of Expenditure Lodging	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: McGinty, Kathleen, , ,		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) _____	
		2016	
		368876.35	

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA6P2G7
Purpose of Expenditure Lodging	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: McGinty, Kathleen, , ,		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) _____	
		2016	
		368876.35	

(a) SUBTOTAL of Itemized Independent Expenditures.....	163.50
(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 Woodson, Brein, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 805 Paulie Murray Lane		Amount 17.10	
City Durham	State NC	Zip Code 27701	Transaction ID : VN7CZA6QHM0
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: Burr, Richard, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Woodson, Brein, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 805 Paulie Murray Lane		Amount 17.10	
City Durham	State NC	Zip Code 27701	Transaction ID : VN7CZA6QJX0
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Woodson, Brein, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 805 Paulie Murray Lane		Amount 17.10	
City Durham	State NC	Zip Code 27701	Transaction ID : VN7CZA6QPR0
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Woodson, Brein, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 805 Paulie Murray Lane		Amount 17.10	
City Durham	State NC	Zip Code 27701	Transaction ID : VN7CZA6QR14
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worthy, Kela, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 100 Brunson Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1758	Transaction ID : VN7CZA6NKR7
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worthy, Kela, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 100 Brunson Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1758	Transaction ID : VN7CZA6NND5
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	85.50
(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 Worthy, Kela, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 100 Brunson Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1758	Transaction ID : VN7CZA6NQ22
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: Portman, Rob, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Worthy, Kela, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 100 Brunson Ave		Amount 34.20	
City Columbus	State OH	Zip Code 43203-1758	Transaction ID : VN7CZA6NRQ1
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: Strickland, Ted, , ,		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		897326.39	

Full Name (Last, First, Middle Initial) of Payee Wren, Ronald, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3304 Joes Way		Amount 34.20	
City Columbus	State OH	Zip Code 43223-3487	Transaction ID : VN7CZA6NKM5
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: Clinton, Hillary, , ,		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		1672274.44	

(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 Wren, Ronald, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3304 Joes Way		Amount 34.20	
City Columbus	State OH	Zip Code 43223-3487	Transaction ID : VN7CZA6NN94
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Wren, Ronald, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3304 Joes Way		Amount 34.20	
City Columbus	State OH	Zip Code 43223-3487	Transaction ID : VN7CZA6NPY0
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Wren, Ronald, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3304 Joes Way		Amount 34.20	
City Columbus	State OH	Zip Code 43223-3487	Transaction ID : VN7CZA6NRK9
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Wright, Rachel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PS34
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Wright, Rachel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PTN7
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Wright, Rachel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PW72
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		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 Wright, Rachel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA6PXS5
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Yenke, Kyle, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1501 Presidential Dr Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43212-4204	Transaction ID : VN7CZA6NK83
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Yenke, Kyle, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1501 Presidential Dr Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43212-4204	Transaction ID : VN7CZA6NMX9
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Yenke, Kyle, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1501 Presidential Dr Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43212-4204	Transaction ID : VN7CZA6NPJ8
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: Portman, Rob, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Yenke, Kyle, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 1501 Presidential Dr Apt B		Amount 34.20	
City Columbus	State OH	Zip Code 43212-4204	Transaction ID : VN7CZA6NR74
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: Strickland, Ted, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 897326.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Zerpa Boissiere, Javier, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3035 Mesa Verde Dr Apt 2908		Amount 34.20	
City Orlando	State FL	Zip Code 32837-4385	Transaction ID : VN7CZA6P412
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		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 Zerpa Boissiere, Javier, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3035 Mesa Verde Dr Apt 2908		Amount 34.20	
City Orlando	State FL	Zip Code 32837-4385	Transaction ID : VN7CZA6P5G4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94857.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Zerpa Boissiere, Javier, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3035 Mesa Verde Dr Apt 2908		Amount 34.20	
City Orlando	State FL	Zip Code 32837-4385	Transaction ID : VN7CZA6P668
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Zerpa Boissiere, Javier, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 3035 Mesa Verde Dr Apt 2908		Amount 34.20	
City Orlando	State FL	Zip Code 32837-4385	Transaction ID : VN7CZA6P6S6
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		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 Zokaites, Jennifer, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15229-1825	
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
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		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) ▶	
		2016 1672274.44	

Transaction ID : VN7CZA6NVX4

Full Name (Last, First, Middle Initial) of Payee Zokaites, Jennifer, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15229-1825	
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: McGinty, Kathleen, , ,		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) ▶	
		2016 368876.35	

Transaction ID : VN7CZA6NX25

Full Name (Last, First, Middle Initial) of Payee Zuniga, Emilio, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2305 Rada Dr		Amount 17.10	
City Durham	State NC	Zip Code 27703-6064	
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: Burr, Richard, , ,		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 236458.09	

Transaction ID : VN7CZA6QH77

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	153.90
(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 Zuniga, Emilio, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2305 Rada Dr		Amount 17.10	
City Durham	State NC	Zip Code 27703-6064	Transaction ID : VN7CZA6QJG8
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: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 236458.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Zuniga, Emilio, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2305 Rada Dr		Amount 17.10	
City Durham	State NC	Zip Code 27703-6064	Transaction ID : VN7CZA6QP87
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: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Zuniga, Emilio, , ,		Date of Public Distribution/Dissemination 10 / 28 / 2016	
Mailing Address 2305 Rada Dr		Amount 17.10	
City Durham	State NC	Zip Code 27703-6064	Transaction ID : VN7CZA6QQM1
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: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1672274.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	90683.54