

# 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 <b>Colorado People's Action</b>			3. FEC Identification Number <b>C</b> C90016585
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 700 Kalamath St.			
(c) City, State and ZIP Code Denver CO 80204			
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 .....  443.11

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.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Chacon, Lizeth, , ,	<i>Chacon, Lizeth, , ,</i>	11/02/2016

[Electronically Filed]

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)  
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Espinosa, Daniel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 808 S Ridgeland		Amount 114.00	
City Oak Park	State IL	Zip Code 60304	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Transaction ID : F57.4345
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Calendar Year-To-Date Per Election for Office Sought		1782.16	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 Espinosa, Daniel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 808 S Ridgeland		Amount 114.00	
City Oak Park	State IL	Zip Code 60304	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	Transaction ID : F57.4346
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		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		3923.42	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 People's Action		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 810 N Milwaukee Ave.		Amount 65.00	
City Chicago	State IL	Zip Code 60642	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Transaction ID : F57.4347
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Calendar Year-To-Date Per Election for Office Sought		1668.16	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)

(a) SUBTOTAL of Itemized Independent Expenditures.....	293.00
(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)  
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee People's Action		Date of Public Distribution/Dissemination 11 / 01 / 2016	
Mailing Address 810 N Milwaukee Ave.		Amount 65.00	
City Chicago	State IL	Zip Code 60642	Transaction ID : F57.4348
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/Type	Office Sought: <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 J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3809.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 11 / 01 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 13.71	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4349
Purpose of Expenditure Paryroll & Benefits - No on Trump	Category/Type	Office Sought: <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 J., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3937.13		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Worku, Robel, , ,		Date of Public Distribution/Dissemination 11 / 01 / 2016	
Mailing Address 3327 S Argonne Ct.		Amount 13.70	
City Aurora	State CO	Zip Code 80013	Transaction ID : F57.4350
Purpose of Expenditure Paryroll & Benefits - No on Coffman	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1795.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	92.41
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Colorado People's Action

Full Name (Last, First, Middle Initial) of Payee Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 28.85	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Coffman		Category/ Type	Transaction ID : F57.4351
Name of Federal Candidate Supported or Opposed by Expenditure: COFFMAN, MIKE REP., , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Calendar Year-To-Date Per Election for Office Sought		1824.71	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 Youdelman, Sondra, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 32 Clifton Place Apt. 3		Amount 28.85	
City Brooklyn	State NY	Zip Code 11238	
Purpose of Expenditure Paryroll & Benefits - No on Trump		Category/ Type	Transaction ID : F57.4352
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD J., , ,		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		3965.98	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		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure		Category/ Type	Transaction ID
Name of Federal Candidate Supported or Opposed by Expenditure:		Office Sought: <input type="checkbox"/> House <input 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 type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	57.70
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	443.11