

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) National Nurses United for Patient Protection
FEC IDENTIFICATION NUMBER C C00490375
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Clear Channel Outdoor
Mailing Address PO Box 591790
City San Antonio State TX Zip Code 78259-0139
Purpose of Expenditure Printing
Name of Federal Candidate BERNARD SANDERS
Calendar Year-To-Date Per Election for Office Sought 46556.44
Date of Public Distribution/Dissemination 11/16/2015
Amount 45300.00
Transaction ID : D689894
Date of Disbursement or Obligation 11/04/2015
Office Sought: President
Disbursement For: Primary

Full Name of Payee Lamar Companies
Mailing Address PO Box 96030
City Baton Rouge State LA Zip Code 70896
Purpose of Expenditure Print advertising
Name of Federal Candidate BERNARD SANDERS
Calendar Year-To-Date Per Election for Office Sought 19687.50
Date of Public Distribution/Dissemination 11/16/2015
Amount 19687.50
Transaction ID : D689968
Date of Disbursement or Obligation 11/09/2015
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 64987.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature Carolyn Hietamaki [Electronically Filed] Date 11/16/2015

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Full Name of Payee Autumn Press
Mailing Address 945 Camelia St
City Berkeley State CA Zip Code 94710-1437
Purpose of Expenditure Printing
Name of Federal Candidate BERNARD SANDERS Support Oppose
Calendar Year-To-Date Per Election for Office Sought 46556.44

Date of Public Distribution/Dissemination 11 / 12 / 2015
Amount 1256.44
Transaction ID : D689992
Date of Disbursement or Obligation 11 / 11 / 2015
Office Sought: House District: 00
President Senate State: IA
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Outfront Media
Mailing Address 185 US Highway 46
City Fairfield State NJ Zip Code 07004
Purpose of Expenditure Print advertising
Name of Federal Candidate BERNARD SANDERS Support Oppose
Calendar Year-To-Date Per Election for Office Sought 11966.50

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 11966.50
Transaction ID : D690136
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: NV
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 13222.94
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature Carolyn Hietamaki [Electronically Filed] Date 11 / 16 / 2015

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NAME OF COMMITTEE (In Full) National Nurses United for Patient Protection
FEC IDENTIFICATION NUMBER C C00490375
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Full Name of Payee Outfront Media
Mailing Address 185 US Highway 46
City Fairfield State NJ Zip Code 07004
Purpose of Expenditure Print advertising
Name of Federal Candidate BERNARD SANDERS
Calendar Year-To-Date Per Election for Office Sought 9299.23

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 9299.23
Transaction ID : D690137
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: President
Disbursement For: Primary

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Name of Federal Candidate
Calendar Year-To-Date Per Election for Office Sought

Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation
Office Sought:
Disbursement For:

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 9299.23, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 87509.67

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature Carolyn Hietamaki [Electronically Filed] Date 11 / 16 / 2015