

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**United We Can**

ADDRESS (number and street) **1800 Massachusetts Ave NW**  
 Check if different than previously reported. (ACC) **Washington DC 20036**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00523621** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2016 through  /  /  2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Hudson, Gerald, , ,  
Type or Print Name of Treasurer

Signature of Treasurer Hudson, Gerald, , , [Electronically Filed] Date  /  /  2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

**United We Can**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		1894964.63
(b) Cash on Hand at Beginning of Reporting Period.....	1894964.63	
(c) Total Receipts (from Line 19) .....	1516494.01	1538766.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3411458.64	3433730.64
7. Total Disbursements (from Line 31).....	1188994.51	1211266.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2222464.13	2222464.13
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	10594139.03	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**United We Can**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	22272.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	22272.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1516494.01	1516494.01
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1516494.01	1538766.01
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1516494.01	1538766.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1516494.01	1538766.01

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	16494.51	38766.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	16494.51	38766.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	1172500.00	1172500.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1188994.51	1211266.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1188994.51	1211266.51

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1516494.01	1538766.01
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1516494.01	1538766.01
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	16494.51	38766.51
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16494.51	38766.51

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 22
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**United We Can**

**A. NEXTGEN CLIMATE ACTION COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 700 13TH STREET, NW  
SUITE 600  
City WASHINGTON State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C** C00547349  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 327500.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : C7112750**  
Amount of Each Receipt this Period 327500.00  
 Memo Item

**B. SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1800 MASSACHUSETTS AVE NW  
City WASHINGTON State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C** C00004036  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1188994.01

Date of Receipt 06 / 23 / 2016  
**Transaction ID : C7112749**  
Amount of Each Receipt this Period 1172500.00  
 Memo Item

**C. SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1800 MASSACHUSETTS AVE NW  
City WASHINGTON State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C** C00004036  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify)  
Aggregate Year-to-Date ▼ 1188994.01

Date of Receipt 06 / 29 / 2016  
**Transaction ID : C7112751**  
Amount of Each Receipt this Period 16494.01  
 Memo Item  
\* In-Kind: Staff Salaries & Benefits

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1516494.01
<b>TOTAL</b> This Period (last page this line number only).....	1516494.01

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**United We Can**

**A.** Full Name (Last, First, Middle Initial)  
SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

Mailing Address 1800 MASSACHUSETTS AVE NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement  
Staff Salaries & Benefits

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement: MM / DD / YYYY  
06 / 29 / 2016

FEC Identification Number  
C C00004036  
Transaction ID : D366368

Amount of Each Disbursement this Period  
16494.01

Memo Item \* In-Kind Received

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify)

Category/Type

Date of Disbursement: MM / DD / YYYY

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement: MM / DD / YYYY

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	16494.01
<b>TOTAL</b> This Period (last page this line number only)..... ▶	16494.01

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 8 OF 22
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**United We Can**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Action United</b>			Nature of Debt (Purpose): Canvass, Bird-dogging & Rallies
Mailing Address 846 N Broad St.			
City Philadelphia	State PA	Zip Code 19130-2234	

Outstanding Balance Beginning This Period 44130.20	<b>Transaction ID : D300061</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 44130.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Alliance for Californians for Community Empowerment</b>			Nature of Debt (Purpose): Canvass, Bird-dogging & Rallies
Mailing Address 3655 S. Grand Ave.			
City Los Angeles	State CA	Zip Code 90007-4316	

Outstanding Balance Beginning This Period 30591.32	<b>Transaction ID : D300059</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 30591.32

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Ardleigh Group</b>			Nature of Debt (Purpose): Canvassing Services
Mailing Address PO Box 12182			
City Washington	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D366367</b>	
Amount Incurred This Period 200000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200000.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	274721.52
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 22
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**United We Can**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Centaur North Strategic Communications</b>			Nature of Debt (Purpose): Voter Canvass Literature
Mailing Address PO Box 1474			
City Whittier	State CA	Zip Code 90609	

Outstanding Balance Beginning This Period 9240.00	Transaction ID : D304193	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9240.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Citizen Action of NY</b>			Nature of Debt (Purpose): Canvass, Bird-dogging & Rallies
Mailing Address 94 Central Avenue			
City Albany	State NY	Zip Code 12206-3002	

Outstanding Balance Beginning This Period 6042.60	Transaction ID : D300056	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6042.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Fair Share Alliance, Inc.</b>			Nature of Debt (Purpose): Canvass, Bird-dogging & Rallies
Mailing Address 218 D St SE			
City Washington	State DC	Zip Code 20003-1900	

Outstanding Balance Beginning This Period 37892.26	Transaction ID : D300057	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 37892.26

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	53174.86
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 22
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**United We Can**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Florida Consumer Action Network, Inc.</b>			Nature of Debt (Purpose): Canvass, Bird-dogging & Rallies
Mailing Address 3006 W Kennedy Blvd. Ste B			
City Tampa	State FL	Zip Code 33609-3289	

Outstanding Balance Beginning This Period <input type="text" value="34884.00"/>	<b>Transaction ID : D300058</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="34884.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Florida New Majority</b>			Nature of Debt (Purpose): Canvass, Bird-dogging & Rallies
Mailing Address 6127 NW 7th Avenue			
City Miami	State FL	Zip Code 33127-1111	

Outstanding Balance Beginning This Period <input type="text" value="39776.09"/>	<b>Transaction ID : D300060</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="39776.09"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mack/Crouse Group LLC</b>			Nature of Debt (Purpose): Voter Canvass Literature
Mailing Address 4900 Seminary Road Suite 1020			
City Alexandria	State VA	Zip Code 22311	

Outstanding Balance Beginning This Period <input type="text" value="29301.92"/>	<b>Transaction ID : D304184</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="29301.92"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="103962.01"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 22
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**United We Can**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mission Control Inc</b>			Nature of Debt (Purpose): Voter Canvass Literature
Mailing Address 114A Mansfield Hollow Road			
City Mansfield Center	State CT	Zip Code 06250	

Outstanding Balance Beginning This Period <input type="text" value="2540.83"/>	<b>Transaction ID : D304195</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2540.83"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>One Pennsylvania</b>			Nature of Debt (Purpose): Canvass, Bird-dogging & Rallies (Non-Express Advocacy)
Mailing Address 1500 North Second Street, Suite 11			
City Harrisburg	State PA	Zip Code 17102	

Outstanding Balance Beginning This Period <input type="text" value="19605.00"/>	<b>Transaction ID : D298042</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="19605.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Our DC</b>			Nature of Debt (Purpose): Canvass, Bird-dogging & Rallies (Non-Express Advocacy)
Mailing Address 1800 Massachusetts Ave NW			
City Washington	State DC	Zip Code 20036	

Outstanding Balance Beginning This Period <input type="text" value="45453.00"/>	<b>Transaction ID : D297985</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="45453.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="67598.83"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 22
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**United We Can**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SEIU General Fund</b>			Nature of Debt (Purpose): Est. payment for salary and other canvass-related expenses from 6/20-11/2, bird-dogging & rallies
Mailing Address 1800 Massachusetts Ave NW			
City Washington	State DC	Zip Code 20036	

Outstanding Balance Beginning This Period 6473285.24	<b>Transaction ID : D285704</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6473285.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SEIU General Fund</b>			Nature of Debt (Purpose): Salary and other canvass-related expenses from 6/11-9/30
Mailing Address 1800 Massachusetts Ave NW			
City Washington	State DC	Zip Code 20036	

Outstanding Balance Beginning This Period 3371597.26	<b>Transaction ID : D286612</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3371597.26

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SEIU Healthcare Wisconsin</b>			Nature of Debt (Purpose): Canvass, Bird-dogging & Rallies (Non-Express Advocacy)
Mailing Address 4513 Vernon Blvd Suite 300			
City Madison	State WI	Zip Code 53705	

Outstanding Balance Beginning This Period 91165.13	<b>Transaction ID : D298020</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 91165.13

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	9936047.63
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 22
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**United We Can**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SEIU Healthcare Wisconsin</b>			Nature of Debt (Purpose): Canvass & GOTV Activities
Mailing Address 4513 Vernon Blvd Suite 300			
City Madison	State WI	Zip Code 53705	

Outstanding Balance Beginning This Period <input type="text" value="20000.00"/>	<b>Transaction ID : D304201</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="20000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SEIU Local 1199 WOK</b>			Nature of Debt (Purpose): Canvass, Bird-dogging & Rallies (Non-Express Advocacy)
Mailing Address 1395 Dublin Road			
City Columbus	State OH	Zip Code 43215	

Outstanding Balance Beginning This Period <input type="text" value="14907.00"/>	<b>Transaction ID : D297979</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="14907.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SEIU Local 3</b>			Nature of Debt (Purpose): Canvass, Bird-dogging & Rallies (Non-Express Advocacy)
Mailing Address 4 Bunker Hill Industrial Park			
City Boston	State MA	Zip Code 02129	

Outstanding Balance Beginning This Period <input type="text" value="22595.00"/>	<b>Transaction ID : D297935</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="22595.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="57502.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 22
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**United We Can**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Pivot Group</b>			Nature of Debt (Purpose): Voter Canvass Literature
Mailing Address 1720 I Street, NW Suite 550			
City Washington	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period 11986.66	Transaction ID : D304200	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11986.66

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Pivot Group</b>			Nature of Debt (Purpose): Doorhangers & Voter Canvass Literature
Mailing Address 1720 I Street, NW Suite 550			
City Washington	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D366365	
Amount Incurred This Period 23940.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 23940.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>United for New York, Inc.</b>			Nature of Debt (Purpose): Canvass, Bird-dogging & Rallies (Non-Express Advocacy)
Mailing Address 330 W 42nd Street, Suite 900			
City New York	State NY	Zip Code 10036	

Outstanding Balance Beginning This Period 11101.00	Transaction ID : D298028	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11101.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	47027.66
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 22
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**United We Can**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Working Families Organization, Inc.</b>			Nature of Debt (Purpose): Canvass, Bird-dogging & Rallies
Mailing Address 2 Nevins Street			
City Brooklyn	State NY	Zip Code 11217-1010	

Outstanding Balance Beginning This Period		<b>Transaction ID : D300055</b>	
54104.52			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	54104.52	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	54104.52
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	10594139.03
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	10594139.03

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>United We Can</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00523621
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Check if  24-hour report  48-hour report  New report Amends report filed on MM / DD / YYYY

Full Name of Payee <b>Ardleigh Group</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 20 / 2016
Mailing Address PO Box 12182		Amount 303500.00
City Washington	State DC	
Zip Code 20006		Transaction ID : <b>D365740</b>
Purpose of Expenditure Partial Payment for Canvassing Services Disclosed on 6/22 48-Hour Notice		Date of Disbursement or Obligation MM / DD / YYYY 06 / 03 / 2016
Category/Type 001		
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
<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) ▶
1396440.00		

Full Name of Payee <b>Ardleigh Group</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 20 / 2016
Mailing Address PO Box 12182		Amount 26500.00
City Washington	State DC	
Zip Code 20006		Transaction ID : <b>D365741</b>
Purpose of Expenditure Canvassing Services		Date of Disbursement or Obligation MM / DD / YYYY 06 / 03 / 2016
Category/Type 001		
Name of Federal Candidate: TRUMP, DONALD J, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
<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) ▶
1396440.00		

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	330000.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(a) 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.

Hudson, Gerald, , , [Electronically Filed] Date MM / DD / YYYY  
Signature 10 / 03 / 2016



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
United We Can
FEC IDENTIFICATION NUMBER
C C00523621

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Ardleigh Group
Mailing Address
PO Box 12182
City
Washington State
DC Zip Code
20006
Purpose of Expenditure
Canvassing Services
Category/Type
001
Date of Public Distribution/Dissemination
06 / 22 / 2016
Amount
154375.00
Transaction ID : D365742
Date of Disbursement or Obligation
06 / 03 / 2016

Name of Federal Candidate:
CLINTON, HILLARY RODHAM, ,
Support Oppose
Office Sought:
House District:
President Senate State:
Calendar Year-To-Date
Per Election for Office Sought
1396440.00
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Ardleigh Group
Mailing Address
PO Box 12182
City
Washington State
DC Zip Code
20006
Purpose of Expenditure
Canvassing Services
Category/Type
001
Date of Public Distribution/Dissemination
06 / 22 / 2016
Amount
8125.00
Transaction ID : D365743
Date of Disbursement or Obligation
06 / 03 / 2016

Name of Federal Candidate:
TRUMP, DONALD J, ,
Support Oppose
Office Sought:
House District:
President Senate State:
Calendar Year-To-Date
Per Election for Office Sought
1396440.00
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
162500.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) 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.

Hudson, Gerald, ,
[Electronically Filed]
Date
10 / 03 / 2016
Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>United We Can</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00523621
---	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Terra Strategies, LLC</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 100 East Grand Ave. Suite 380	Amount <input type="text"/>
City Des Moines State IA Zip Code 50309	Transaction ID : <b>D365744</b>
Purpose of Expenditure Canvassing Services Category/Type <input type="text"/> 001	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>

Name of Federal Candidate: CLINTON, HILLARY RODHAM, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1396440.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Terra Strategies, LLC</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 100 East Grand Ave. Suite 380	Amount <input type="text"/>
City Des Moines State IA Zip Code 50309	Transaction ID : <b>D365745</b>
Purpose of Expenditure Canvassing Services Category/Type <input type="text"/> 001	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>

Name of Federal Candidate: TRUMP, DONALD J, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1396440.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 155000.00
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

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.

Hudson, Gerald, , ,

[Electronically Filed]

Date

/  /

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>United We Can</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00523621</span> </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Terra Strategies, LLC</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 06 / 23 / 2016						
Mailing Address 100 East Grand Ave. Suite 380	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">261250.00</div> Transaction ID : <b>D365763</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 06 / 03 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Des Moines</td> <td>IA</td> <td>50309</td> </tr> </table>		City	State	Zip Code	Des Moines	IA	50309
City		State	Zip Code				
Des Moines	IA	50309					
Purpose of Expenditure Canvassing Services							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CLINTON, HILLARY RODHAM, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1396440.00</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item <b>Terra Strategies, LLC</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 06 / 23 / 2016						
Mailing Address 100 East Grand Ave. Suite 380	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">13750.00</div> Transaction ID : <b>D365764</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 06 / 03 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Des Moines</td> <td>IA</td> <td>50309</td> </tr> </table>		City	State	Zip Code	Des Moines	IA	50309
City		State	Zip Code				
Des Moines	IA	50309					
Purpose of Expenditure Canvassing Services							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD J, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1396440.00</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">275000.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

\_\_\_\_\_  
 Signature
 

 [Electronically Filed]
 

 Date M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2016

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>United We Can</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00523621
---	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Terra Strategies, LLC</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 100 East Grand Ave. Suite 380	Amount <input type="text"/> 237500.00 <b>Transaction ID : D365844</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Des Moines State IA Zip Code 50309	
Purpose of Expenditure Canvassing Services Category/Type 001	

Name of Federal Candidate: CLINTON, HILLARY RODHAM, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1396440.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Terra Strategies, LLC</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 100 East Grand Ave. Suite 380	Amount <input type="text"/> 12500.00 <b>Transaction ID : D365845</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Des Moines State IA Zip Code 50309	
Purpose of Expenditure Canvassing Services Category/Type 001	

Name of Federal Candidate: TRUMP, DONALD J, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1396440.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 250000.00
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

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.

Hudson, Gerald, , ,

[Electronically Filed]

Date

/  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
United We Can
FEC IDENTIFICATION NUMBER
C C00523621

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Ardleigh Group
Memo Item
Date of Public Distribution/Dissemination
06 / 20 / 2016
Mailing Address
PO Box 12182
Amount
200000.00
Transaction ID : D366366
Date of Disbursement or Obligation
06 / 03 / 2016
City
Washington
State
DC
Zip Code
20006
Purpose of Expenditure
Remaining Balance of Canvassing Services Disclosed on 6/22
48-Hour Notice
Category/ Type
001

Name of Federal Candidate:
CLINTON, HILLARY RODHAM, ,
Support
Oppose
Office Sought:
House
Senate
State:
President
General
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
The Pivot Group
Memo Item
Date of Public Distribution/Dissemination
06 / 17 / 2016
Mailing Address
1720 I Street, NW Suite 550
Amount
21300.00
Transaction ID : D365719
Date of Disbursement or Obligation
06 / 10 / 2016
City
Washington
State
DC
Zip Code
20006
Purpose of Expenditure
Doorhangers
Category/ Type
006

Name of Federal Candidate:
CLINTON, HILLARY RODHAM, ,
Support
Oppose
Office Sought:
House
Senate
State:
President
General
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....
(a) 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.

Hudson, Gerald, ,

[Electronically Filed]

Date

10 / 03 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
United We Can
FEC IDENTIFICATION NUMBER
C C00523621

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: The Pivot Group
Mailing Address: 1720 I Street, NW Suite 550
City: Washington State: DC Zip Code: 20006
Purpose of Expenditure: Voter Canvass Literature
Category/Type: 006
Date of Public Distribution/Dissemination: 06/17/2016
Amount: 2640.00
Transaction ID: D365720
Date of Disbursement or Obligation: 06/10/2016

Name of Federal Candidate: CLINTON, HILLARY RODHAM, ,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures 1172500.00

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.

Hudson, Gerald, ,

[Electronically Filed]

Date

10/03/2016

Signature