

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 77265.78

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Mr. James Cobb Jr.	<i>Mr. James Cobb Jr.</i>	09/21/2016
	<i>[Electronically Filed]</i>	

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee A. Extended Stay America Cincinnati - Covington		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 650 W 3rd St		Amount 27.95	
City Covington	State KY	Zip Code 41011-1204	Transaction ID : VN7CZA3Q3E4
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee A. Extended Stay America Cincinnati - Covington		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 650 W 3rd St		Amount 27.95	
City Covington	State KY	Zip Code 41011-1204	Transaction ID : VN7CZA3Q3Y1
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee A. Extended Stay America Cincinnati - Covington		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 650 W 3rd St		Amount 27.95	
City Covington	State KY	Zip Code 41011-1204	Transaction ID : VN7CZA3Q4E7
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: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	83.85
(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 A. Extended Stay America Cincinnati - Covington		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 650 W 3rd St		Amount 27.95	
City Covington	State KY	Zip Code 41011-1204	Transaction ID : VN7CZA3Q4Y4
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA3NV59
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA3NW36
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.55
(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 Morocco Abdul-Haqq		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA3NYX4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Morocco Abdul-Haqq		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4034 Shady Brook Dr		Amount 22.80	
City Kittrell	State NC	Zip Code 27544-9716	Transaction ID : VN7CZA3NZV1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Abraham		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5543 Minaret Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32821-8120	Transaction ID : VN7CZA3NPH4
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: Marco Rubio		Check One: <input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 23693.00		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 Samuel Abraham		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5543 Minaret Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32821-8120	Transaction ID : VN7CZA3NQG7
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		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 Abraham		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5543 Minaret Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32821-8120	Transaction ID : VN7CZA3NRE4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Abraham		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5543 Minaret Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32821-8120	Transaction ID : VN7CZA3NSC1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Pedro Acosta		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3827 N Franklin St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19140-3228	Transaction ID : VN7CZA3NKG0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Pedro Acosta		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3827 N Franklin St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19140-3228	Transaction ID : VN7CZA3NMM2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Stefan Adams		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2746 Atwood Ter		Amount 68.40	
City Columbus	State OH	Zip Code 43211-1108	Transaction ID : VN7CZA3QB36
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Stefan Adams		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2746 Atwood Ter		Amount 68.40	
City Columbus	State OH	Zip Code 43211-1108	
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3QCD6

Full Name (Last, First, Middle Initial) of Payee Aderonke Adekanle		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 90 Pine St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PFS0

Full Name (Last, First, Middle Initial) of Payee Aderonke Adekanle		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 90 Pine St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PHD9

(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 Aderonke Adekanle		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 90 Pine St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401	Transaction ID : VN7CZA3PP64
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Aderonke Adekanle		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 90 Pine St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401	Transaction ID : VN7CZA3PQR9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Airport on the Run		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10500 Natural Bridge Rd		Amount 9.31	
City Saint Louis	State MO	Zip Code 63134-4130	Transaction ID : VN7CZA3Q8T1
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	54.91
(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 Airport on the Run		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10500 Natural Bridge Rd		Amount 9.31	
City Saint Louis	State MO	Zip Code 63134-4130	Transaction ID : VN7CZA3Q980
Purpose of Expenditure Gas	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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Nimo Ali		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4526 Hambrick St		Amount 21.38	
City Columbus	State OH	Zip Code 43228-4531	Transaction ID : VN7CZA3QBZ7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nimo Ali		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4526 Hambrick St		Amount 21.38	
City Columbus	State OH	Zip Code 43228-4531	Transaction ID : VN7CZA3QD97
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	52.07
(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 William Allen		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3431 1st Ave		Amount 68.40	
City Urbancrest	State OH	Zip Code 43123-1311	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3QBG9

Full Name (Last, First, Middle Initial) of Payee William Allen		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3431 1st Ave		Amount 68.40	
City Urbancrest	State OH	Zip Code 43123-1311	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3QCT8

Full Name (Last, First, Middle Initial) of Payee Noah Alloy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 973 Mount Vernon Ave Apt A		Amount 99.07	
City Columbus	State OH	Zip Code 43203-1573	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3QBP6

(a) SUBTOTAL of Itemized Independent Expenditures.....	235.87
(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 Noah Alloy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 973 Mount Vernon Ave Apt A		Amount 99.07	
City Columbus	State OH	Zip Code 43203-1573	Transaction ID : VN7CZA3QD06
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		515234.22	

Full Name (Last, First, Middle Initial) of Payee Alvaro Alva		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2313 N Park Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA3NK11
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

Full Name (Last, First, Middle Initial) of Payee Alvaro Alva		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2313 N Park Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA3NM54
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		178527.38	

(a) SUBTOTAL of Itemized Independent Expenditures.....	235.87
(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 Hafiz Amaker		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 236 W Walnut Ln		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-3204	Transaction ID : VN7CZA3NKR1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hafiz Amaker		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 236 W Walnut Ln		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-3204	Transaction ID : VN7CZA3NMX3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ryan Anders		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1954 Amato Dr		Amount 68.40	
City North Versailles	State PA	Zip Code 15137-2735	Transaction ID : VN7CZA3PBC8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(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 Ryan Anders		Date of Public Distribution/Dissemination 09 / 20 / 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	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Anderson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 714 Watt Ln		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15219-4218	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Anderson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 714 Watt Ln		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15219-4218	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Shane Anderson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3250 Rider Trl S		Amount 45.91	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA3Q5C4
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Shane Anderson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3250 Rider Trl S		Amount 45.91	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA3Q675
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Shane Anderson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3250 Rider Trl S		Amount 6.25	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA3QAC4
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	98.07
(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 Shane Anderson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3250 Rider Trl S		Amount 6.25	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA3QAE0
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Meagan Andrews		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 441 Magnolia Ave		Amount 68.40	
City Cuyahoga Falls	State OH	Zip Code 44221-5133	Transaction ID : VN7CZA3QBM0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Meagan Andrews		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 441 Magnolia Ave		Amount 68.40	
City Cuyahoga Falls	State OH	Zip Code 44221-5133	Transaction ID : VN7CZA3QCY0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	143.05
(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 Lucas Anorak-Neill		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3900 Reed St		Amount 21.38	
City Garden City	State ID	Zip Code 83714-6458	Transaction ID : VN7CZA3PC22
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lucas Anorak-Neill		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3900 Reed St		Amount 21.38	
City Garden City	State ID	Zip Code 83714-6458	Transaction ID : VN7CZA3PD98
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Arrington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3521 Dearborn Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704-2919	Transaction ID : VN7CZA3NVW1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	65.56
(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 Michael Arrington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3521 Dearborn Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704-2919	Transaction ID : VN7CZA3NWT8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Arrington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3521 Dearborn Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704-2919	Transaction ID : VN7CZA3NZM6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Arrington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3521 Dearborn Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704-2919	Transaction ID : VN7CZA3P0J1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Carlos Badaraco		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 34.20	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA3NNW8
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: Marco Rubio		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Carlos Badaraco		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 34.20	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA3NQA0
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Carlos Badaraco		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 34.20	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA3NQS8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Carlos Badaraco		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6179 Westgate Dr Apt 435		Amount 34.20	
City Orlando	State FL	Zip Code 32835-7062	Transaction ID : VN7CZA3NS56
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jacob Baldwin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3633 Spring Garden St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19104-2351	Transaction ID : VN7CZA3NK45
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jacob Baldwin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3633 Spring Garden St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19104-2351	Transaction ID : VN7CZA3NM87
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Natasha Barclay		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 680 St Brendan St		Amount 44.58	
City Saint Louis	State MO	Zip Code 63031	Transaction ID : VN7CZA3Q575
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Natasha Barclay		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 680 St Brendan St		Amount 44.58	
City Saint Louis	State MO	Zip Code 63031	Transaction ID : VN7CZA3Q634
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Andrea Barrow		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4088 Suffolk Rd		Amount 68.40	
City Cleveland	State OH	Zip Code 44121-2357	Transaction ID : VN7CZA3P762
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Andrea Barrow		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4088 Suffolk Rd		Amount 68.40	
City Cleveland	State OH	Zip Code 44121-2357	Transaction ID : VN7CZA3P8N3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Barbara Battle		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7325 Beacon Hill Loop Apt 5		Amount 34.20	
City Orlando	State FL	Zip Code 32818-6426	Transaction ID : VN7CZA3NNT2
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Barbara Battle		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7325 Beacon Hill Loop Apt 5		Amount 34.20	
City Orlando	State FL	Zip Code 32818-6426	Transaction ID : VN7CZA3NQQ2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Catherine Battle		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 48 Good St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-2702	Transaction ID : VN7CZA3NKJ6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Catherine Battle		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 48 Good St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-2702	Transaction ID : VN7CZA3NMQ6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Richard Beadling		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4225 1/2 Murray Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15217-2948	Transaction ID : VN7CZA3PB87
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Richard Beadling		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4225 1/2 Murray Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15217-2948	Transaction ID : VN7CZA3PCF5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Zoe Beale		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5539 Baynton St # 5547		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-2208	Transaction ID : VN7CZA3NK53
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Zoe Beale		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5539 Baynton St # 5547		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-2208	Transaction ID : VN7CZA3NM95
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Michael Begin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12050 Lake Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1892	Transaction ID : VN7CZA3P7N0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Begin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12050 Lake Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1892	Transaction ID : VN7CZA3P942
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Belew		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PYB1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 James Belew		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PZW6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee James Belew		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q1D3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee James Belew		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q2Y8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PX92
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PYT9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q0B4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Shada Bennett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q1W1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		515234.22	

Full Name (Last, First, Middle Initial) of Payee Michael Benton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5158 Columbo St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15224-1035	Transaction ID : VN7CZA3PBK4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

Full Name (Last, First, Middle Initial) of Payee Michael Benton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5158 Columbo St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15224-1035	Transaction ID : VN7CZA3PCT0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		178527.38	

(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 Genesson Beraut		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 906 Fenmdell Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA3NPT5
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Genesson Beraut		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 906 Fenmdell Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA3NRP7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Berrian		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6714 Christopher Park Ln		Amount 68.40	
City Canal Winchester	State OH	Zip Code 43110-8510	Transaction ID : VN7CZA3QB93
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Berrian		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6714 Christopher Park Ln		Amount 68.40	
City Canal Winchester	State OH	Zip Code 43110-8510	Transaction ID : VN7CZA3QCK3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mathew Berry		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 210 Cedar St Lot 44		Amount 68.40	
City Pataskala	State OH	Zip Code 43062-8252	Transaction ID : VN7CZA3QB9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mathew Berry		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 210 Cedar St Lot 44		Amount 68.40	
City Pataskala	State OH	Zip Code 43062-8252	Transaction ID : VN7CZA3QD89
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Regina Berry		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PXN7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Regina Berry		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PZ64
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Regina Berry		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q0Q9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.44
(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 Regina Berry		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q286
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ahmed Bilal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4922 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1406	Transaction ID : VN7CZA3PFJ5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ahmed Bilal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4922 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1406	Transaction ID : VN7CZA3PH64
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	84.08
(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 Ahmed Bilal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4922 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1406	Transaction ID : VN7CZA3PNZ0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ahmed Bilal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4922 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1406	Transaction ID : VN7CZA3PQH3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Karen Bingaman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 486 Waggoner Rd		Amount 99.07	
City Reynoldsburg	State OH	Zip Code 43068-9707	Transaction ID : VN7CZA3QBD5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	144.67
(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 Karen Bingaman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 486 Waggoner Rd		Amount 99.07	
City Reynoldsburg	State OH	Zip Code 43068-9707	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		515234.22	

Full Name (Last, First, Middle Initial) of Payee LaCresha Black		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5959 Theodore Ave FI 2		Amount 27.93	
City Saint Louis	State MO	Zip Code 63136-4711	
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: Roy Blunt		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)	
		5548.09	

Full Name (Last, First, Middle Initial) of Payee LaCresha Black		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5959 Theodore Ave FI 2		Amount 27.93	
City Saint Louis	State MO	Zip Code 63136-4711	
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: Jason Kander		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)	
		5548.09	

(a) SUBTOTAL of Itemized Independent Expenditures.....	154.93
(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 Jacob Blanchard		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 155 Mill Run Ln		Amount 34.20	
City Saint Peters	State MO	Zip Code 63376-7108	Transaction ID : VN7CZA3Q600
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jacob Blanchard		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 155 Mill Run Ln		Amount 34.20	
City Saint Peters	State MO	Zip Code 63376-7108	Transaction ID : VN7CZA3Q6V3
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jawneisha Bland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3399 E 65th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44127-1952	Transaction ID : VN7CZA3P823
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Jawneisha Bland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3399 E 65th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44127-1952	Transaction ID : VN7CZA3P9H4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		515234.22	

Full Name (Last, First, Middle Initial) of Payee Joshua Bland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1026 Jefferson Ave		Amount 68.40	
City Akron	State OH	Zip Code 44302-1046	Transaction ID : VN7CZA3P7W6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

Full Name (Last, First, Middle Initial) of Payee Joshua Bland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1026 Jefferson Ave		Amount 68.40	
City Akron	State OH	Zip Code 44302-1046	Transaction ID : VN7CZA3P9B7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		515234.22	

(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 Malcolm Blowe		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2620 Bapaume Ave		Amount 22.80	
City Norfolk	State VA	Zip Code 23509-1702	Transaction ID : VN7CZA3PG53
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 73119.65			

Full Name (Last, First, Middle Initial) of Payee Malcolm Blowe		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2620 Bapaume Ave		Amount 22.80	
City Norfolk	State VA	Zip Code 23509-1702	Transaction ID : VN7CZA3PHS4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 73119.65			

Full Name (Last, First, Middle Initial) of Payee Malcolm Blowe		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2620 Bapaume Ave		Amount 22.80	
City Norfolk	State VA	Zip Code 23509-1702	Transaction ID : VN7CZA3PPH1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 837667.61			

(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 Malcolm Blowe		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2620 Bapaume Ave		Amount 22.80	
City Norfolk	State VA	Zip Code 23509-1702	Transaction ID : VN7CZA3PR36
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clifton Bostick		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4203 Hewitt St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2173	Transaction ID : VN7CZA3PF36
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clifton Bostick		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4203 Hewitt St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2173	Transaction ID : VN7CZA3PGQ5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Clifton Bostick		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4203 Hewitt St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2173	Transaction ID : VN7CZA3PNG2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clifton Bostick		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4203 Hewitt St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2173	Transaction ID : VN7CZA3PQ25
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Terry Bowman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 603A Park Ave		Amount 4.17	
City Greensboro	State NC	Zip Code 27405-7711	Transaction ID : VN7CZA3P4S5
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.77
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Terry Bowman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 603A Park Ave		Amount 4.17	
City Greensboro	State NC	Zip Code 27405-7711	Transaction ID : VN7CZA3P584
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Terry Bowman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 603A Park Ave		Amount 4.17	
City Greensboro	State NC	Zip Code 27405-7711	Transaction ID : VN7CZA3P6F2
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Terry Bowman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 603A Park Ave		Amount 4.17	
City Greensboro	State NC	Zip Code 27405-7711	Transaction ID : VN7CZA3P6W3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Yolanda Bowser		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2541 N Mole St		Amount 21.38	
City Philadelphia	State PA	Zip Code 19132-3920	Transaction ID : VN7CZA3NKT7
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Yolanda Bowser		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2541 N Mole St		Amount 21.38	
City Philadelphia	State PA	Zip Code 19132-3920	Transaction ID : VN7CZA3NMZ9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 34.20	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA3NVE0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(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 Sandra Brewer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 34.20	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA3NWC7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 73119.65			

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 34.20	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA3NZ65
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 837667.61			

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 34.20	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA3P042
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 837667.61			

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 4.17	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA3P4R8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 4.17	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA3P576
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Sandra Brewer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 4.17	
City Seattle	State WA	Zip Code 98101-3001	Transaction ID : VN7CZA3P6E4
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(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 Sandra Brewer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1118 5th Ave # 330-1		Amount 4.17	
City Seattle	State WA	Zip Code 98101-3001	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3P6V5

Full Name (Last, First, Middle Initial) of Payee Benjamin Britt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1424 Richmond Rd		Amount 68.40	
City Lyndhurst	State OH	Zip Code 44124-2460	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3P7X3

Full Name (Last, First, Middle Initial) of Payee Benjamin Britt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1424 Richmond Rd		Amount 68.40	
City Lyndhurst	State OH	Zip Code 44124-2460	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3P9C5

(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 Haley Brock		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA3NV57
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haley Brock		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA3NWQ4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Haley Brock		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA3NZH2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Haley Brock		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA3P0F7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Donovan Brooks		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1116 Lady Banks Dr		Amount 22.80	
City Durham	State NC	Zip Code 27703-5221	Transaction ID : VN7CZA3NVY7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Donovan Brooks		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1116 Lady Banks Dr		Amount 22.80	
City Durham	State NC	Zip Code 27703-5221	Transaction ID : VN7CZA3NWW4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Donovan Brooks		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1116 Lady Banks Dr		Amount 22.80	
City Durham	State NC	Zip Code 27703-5221	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NZP2

Full Name (Last, First, Middle Initial) of Payee Donovan Brooks		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1116 Lady Banks Dr		Amount 22.80	
City Durham	State NC	Zip Code 27703-5221	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3P0M7

Full Name (Last, First, Middle Initial) of Payee Brian Brown		Date of Public Distribution/Dissemination 09 / 20 / 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: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3PY61

(a) SUBTOTAL of Itemized Independent Expenditures.....	84.08
(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 Brian Brown		Date of Public Distribution/Dissemination 09 / 20 / 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: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brian Brown		Date of Public Distribution/Dissemination 09 / 20 / 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: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brian Brown		Date of Public Distribution/Dissemination 09 / 20 / 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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.44
(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 Dasent Brown		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1209 Majestic Palm Ct		Amount 34.20	
City Apopka	State FL	Zip Code 32712-2455	Transaction ID : VN7CZA3NP67
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dasent Brown		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1209 Majestic Palm Ct		Amount 34.20	
City Apopka	State FL	Zip Code 32712-2455	Transaction ID : VN7CZA3NR29
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Twanna Brown		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 8102 N Broadway		Amount 34.20	
City Saint Louis	State MO	Zip Code 63147-2419	Transaction ID : VN7CZA3Q5Q1
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Twanna Brown		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 8102 N Broadway		Amount 34.20	
City Saint Louis	State MO	Zip Code 63147-2419	Transaction ID : VN7CZA3Q6J2
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marcellus Buckley		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1208 Northdale Ave		Amount 34.20	
City Saint Louis	State MO	Zip Code 63138-3045	Transaction ID : VN7CZA3Q5M7
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marcellus Buckley		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1208 Northdale Ave		Amount 34.20	
City Saint Louis	State MO	Zip Code 63138-3045	Transaction ID : VN7CZA3Q6F9
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q2Z6
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q304
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 11.37	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q312
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.05
(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 -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q320
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 8.87	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q337
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 9.07	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q345
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.99
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 8.87	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3Q353

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3Q361

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 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	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3Q379

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.76
(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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q387
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q3F2
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q3G0
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	23.52
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 11.37	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3Q3H8

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 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	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3Q3J6

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 8.87	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3Q3K4

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.29
(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 -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 9.07	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q3M2
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 8.87	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q3N0
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q3P8
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	25.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q3Q5
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q3R3
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q3Z9
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.73
(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 Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q407
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 11.37	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q414
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q422
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.26
(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 -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 8.87	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q430
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 9.07	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q448
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 8.87	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q456
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	26.81
(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 Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q464
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q472
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q480
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.73
(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 Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q4F5
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement 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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q4G3
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement 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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 11.37	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q4H1
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.05
(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 -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 12.05	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q4J9
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement 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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 8.87	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q4K7
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement 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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 9.07	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q4M5
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.99
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 8.87	
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q4N2

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q4P0

Full Name (Last, First, Middle Initial) of Payee Budget -Cincinnati		Date of Public Distribution/Dissemination 09 / 20 / 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	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q4Q8

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.76
(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 09 / 20 / 2016	
Mailing Address 212 W 4th St		Amount 7.84	
City Cincinnati	State OH	Zip Code 45202-2602	Transaction ID : VN7CZA3Q4R6
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 09 / 20 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.38	
City Bala Cynwyd	State PA	Zip Code 19004-1617	Transaction ID : VN7CZA3NN49
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 1 Belmont Ave		Amount 23.53	
City Bala Cynwyd	State PA	Zip Code 19004-1617	Transaction ID : VN7CZA3NN56
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	55.75
(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-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.38	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3NN64	

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.56	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3NN72	

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.91	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3NN80	

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.85
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.17	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3NN98

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.38	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		178527.38	

Transaction ID : VN7CZA3NND0

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 20 / 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: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		178527.38	

Transaction ID : VN7CZA3NNE8

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.08
(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 Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.38	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NNF5

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.56	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NNG3

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.91	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NNH1

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.85
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Bala Cynwyd		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1 Belmont Ave		Amount 24.17	
City Bala Cynwyd	State PA	Zip Code 19004-1617	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NNJ9

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 24.16	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3P9Y5

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3P9Z3

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.64
(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 Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 22.80	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PA01
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement 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 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PA19
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement 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 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.24	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PA27
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	75.35
(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 Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.19	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3PA34	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.84	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3PA42	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.09	
City Cleveland	State OH	Zip Code 44114-2943	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3PA50	

(a) SUBTOTAL of Itemized Independent Expenditures.....	78.12
(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 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PA68
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PA76
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 24.16	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PAD3
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.78
(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-Cleveland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PAE1
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 22.80	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PAF9
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PAG7
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.42
(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 Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.24	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PAH5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement 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 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.19	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PAJ3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement 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 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.84	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PAK1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	78.27
(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 Budget-Cleveland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 26.09	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PAM9
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement 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 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PAN7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement 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 09 / 20 / 2016	
Mailing Address 1799 Superior Ave		Amount 25.31	
City Cleveland	State OH	Zip Code 44114-2943	Transaction ID : VN7CZA3PAP5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.71
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Columbus		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1030 W 3rd Ave		Amount 25.14	
City Columbus	State OH	Zip Code 43212-3128	
Purpose of Expenditure Rental Van		Category/Type	Transaction ID : VN7CZA3QDK6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	
		837667.61	

Full Name (Last, First, Middle Initial) of Payee Budget-Columbus		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1030 W 3rd Ave		Amount 25.14	
City Columbus	State OH	Zip Code 43212-3128	
Purpose of Expenditure Rental Van		Category/Type	Transaction ID : VN7CZA3QE16
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		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	
		515234.22	

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	
Purpose of Expenditure Rental Van		Category/Type	Transaction ID : VN7CZA3PRR2
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		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	
		73119.65	

(a) SUBTOTAL of Itemized Independent Expenditures.....	57.56
(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 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PRS9
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PRT7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PRW3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 8.86	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PRZ7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 8.86	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PS05
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PS86
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	25.00
(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 Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PS94
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PSA2
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.28	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PSC8
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.84
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 8.86	
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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Transaction ID : VN7CZA3PSF1

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 8.86	
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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Transaction ID : VN7CZA3PSG9

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.13	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3PTR5

(a) SUBTOTAL of Itemized Independent Expenditures.....	24.85
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.13	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PTS3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.13	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PTT1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.13	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PTW7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.39
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 8.68	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PTZ0
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 8.68	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PV08
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.13	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PV82
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	24.49
(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 Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.13	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PV99
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.13	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PVA7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 7.13	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PVC3
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.39
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Greensboro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 8.68	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PVF7
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement 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 09 / 20 / 2016	
Mailing Address 3309 W Gate City Blvd		Amount 8.68	
City Greensboro	State NC	Zip Code 27407-4619	Transaction ID : VN7CZA3PVG5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement 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 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.05	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA3NSK6
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: Marco Rubio		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.41
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.09	
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: Marco Rubio		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)	
		23693.00	

Transaction ID : VN7CZA3NSM4

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.05	
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: Marco Rubio		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)	
		23693.00	

Transaction ID : VN7CZA3NSN2

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.12	
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: Marco Rubio		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)	
		23693.00	

Transaction ID : VN7CZA3NSP0

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.26
(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-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.44	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA3NSQ8
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: Marco Rubio		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement 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 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.01	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA3NSR6
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: Marco Rubio		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement 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 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.05	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA3NSS4
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: Marco Rubio		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.50
(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 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.09	
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: Marco Rubio		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 : VN7CZA3NST2	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.77	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		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 : VN7CZA3NSZ1	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.93	
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: Patrick Murphy		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 : VN7CZA3NT07	

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.79
(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 Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.77	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		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 : VN7CZA3NT15	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.06	
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: Patrick Murphy		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 : VN7CZA3NT23	

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 14.40	
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: Patrick Murphy		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 : VN7CZA3NT31	

(a) SUBTOTAL of Itemized Independent Expenditures.....	40.23
(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-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.60	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA3NT49
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement 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 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.77	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA3NT56
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement 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 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.93	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA3NT64
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.30
(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 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.77	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA3NTB4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.93	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA3NTC2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.77	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA3NTD0
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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.....	38.47
(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-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 13.06	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NTE8

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 14.40	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NTF5

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.60	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NTG3

(a) SUBTOTAL of Itemized Independent Expenditures.....	40.06
(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 Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.77	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3NTH1

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 12.93	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3NTJ9

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.05	
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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3NTQ9

(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-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.09	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NTR7

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.05	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NTS4

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.12	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NTT2

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.26
(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-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.44	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3NTV0

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.01	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3NTW8

Full Name (Last, First, Middle Initial) of Payee Budget-Orlando		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.05	
City Orlando	State FL	Zip Code 32804-6911	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3NTX6

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.50
(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 09 / 20 / 2016	
Mailing Address 2195 W Colonial Dr		Amount 3.09	
City Orlando	State FL	Zip Code 32804-6911	Transaction ID : VN7CZA3NTY4
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 625 Stanwix St		Amount 24.22	
City Pittsburgh	State PA	Zip Code 15222-1417	Transaction ID : VN7CZA3PDF6
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 625 Stanwix St		Amount 24.22	
City Pittsburgh	State PA	Zip Code 15222-1417	Transaction ID : VN7CZA3PDG4
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.53
(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-Pittsburgh		Date of Public Distribution/Dissemination 09 / 20 / 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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		837667.61	

Transaction ID : VN7CZA3PDH1

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 625 Stanwix St		Amount 25.72	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		837667.61	

Transaction ID : VN7CZA3PDJ9

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 20 / 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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		837667.61	

Transaction ID : VN7CZA3PDK7

(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 Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 20 / 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 : VN7CZA3PDM5
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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-Pittsburgh		Date of Public Distribution/Dissemination 09 / 20 / 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 : VN7CZA3PDN3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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-Pittsburgh		Date of Public Distribution/Dissemination 09 / 20 / 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 : VN7CZA3PDV0
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 178527.38		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.89
(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 09 / 20 / 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: Kathleen McGinty		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	
		178527.38	

Transaction ID : VN7CZA3PDW8

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 20 / 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: Kathleen McGinty		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	
		178527.38	

Transaction ID : VN7CZA3PDX6

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 625 Stanwix St		Amount 25.72	
City Pittsburgh	State PA	Zip Code 15222-1417	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		178527.38	

Transaction ID : VN7CZA3PDY4

(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 Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 20 / 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: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PDZ2

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 20 / 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: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PE00

Full Name (Last, First, Middle Initial) of Payee Budget-Pittsburgh		Date of Public Distribution/Dissemination 09 / 20 / 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: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PE18

(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-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.44	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3NFR4
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.19	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3NFS2
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.44	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3NFT0
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.07
(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-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.44	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3NG15	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3NG23	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.44	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3NG31	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.07
(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-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.44	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Transaction ID : VN7CZA3NGW6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.19	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Transaction ID : VN7CZA3NGX4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.44	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Transaction ID : VN7CZA3NGY2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.07
(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-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.44	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3NH57
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement 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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.19	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3NH65
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement 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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.44	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3NH73
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.07
(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-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3P0Q0	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3P0R8	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3P0S6	

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.85
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.10	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P0T4
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 3.00	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P0V2
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 3.00	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P0W0
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	13.10
(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 Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3P1B8	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3P1C6	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3P1D4	

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.85
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.10	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P1E2
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 3.00	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P1F0
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 3.00	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P1G8
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	13.10
(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 Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P372
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement 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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P380
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement 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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P398
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.85
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.10	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3P3A6	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 3.00	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3P3B4	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 3.00	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3P3C0	

(a) SUBTOTAL of Itemized Independent Expenditures.....	13.10
(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 Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P3W6
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P3X4
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.92	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P3Y2
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.85
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.10	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P3Z0
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 3.00	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P408
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 3.00	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3P416
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	13.10
(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 Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.21	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	19.23
(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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.21	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3PSB0	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3PSD5	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 7.01	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3PSE3	

(a) SUBTOTAL of Itemized Independent Expenditures.....	19.23
(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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.11	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3PTV9	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.87	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3PTX5	

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.87	
City Raleigh	State NC	Zip Code 27623	
Purpose of Expenditure Rental Van		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3PTY3	

(a) SUBTOTAL of Itemized Independent Expenditures.....	18.85
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Raleigh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 5.11	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3PVB5
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.87	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3PVD1
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 1000 Rental Car Dr.		Amount 6.87	
City Raleigh	State NC	Zip Code 27623	Transaction ID : VN7CZA3PVE9
Purpose of Expenditure Rental Van	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	18.85
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-St. Louis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 16.03	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA3Q8M4
Purpose of Expenditure Rental Van	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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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-St. Louis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 15.86	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA3Q8N2
Purpose of Expenditure Rental Van	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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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-St. Louis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 15.89	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA3Q8P0
Purpose of Expenditure Rental Van	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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	47.78
(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-St. Louis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 10.31	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA3Q8Q7
Purpose of Expenditure Rental Van	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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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-St. Louis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 15.53	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA3Q8R5
Purpose of Expenditure Rental Van	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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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-St. Louis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 16.03	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA3Q922
Purpose of Expenditure Rental Van	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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.87
(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-St. Louis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 15.86	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA3Q930
Purpose of Expenditure Rental Van	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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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-St. Louis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 15.89	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA3Q948
Purpose of Expenditure Rental Van	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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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-St. Louis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 10.31	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA3Q956
Purpose of Expenditure Rental Van	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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	42.06
(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 Budget-St. Louis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10482 Natural Bridge Rd		Amount 15.53	
City Saint Louis	State MO	Zip Code 63134-3304	Transaction ID : VN7CZA3Q964
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: Jason Kander		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		5548.09	

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 18.25	
City Upper Arlington	State OH	Zip Code 43212-1158	Transaction ID : VN7CZA3QDM4
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 24.94	
City Upper Arlington	State OH	Zip Code 43212-1158	Transaction ID : VN7CZA3QDN2
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(a) SUBTOTAL of Itemized Independent Expenditures.....	58.72
(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-Upper Arlington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 24.86	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA3QDP0
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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-Upper Arlington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 24.52	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA3QDQ7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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-Upper Arlington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 34.69	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA3QDR5
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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.....	84.07
(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-Upper Arlington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 15.75	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA3QDS3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
		2016	
837667.61			

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 18.25	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA3QE24
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		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	
515234.22			

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 24.94	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Transaction ID : VN7CZA3QE32
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought		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	
515234.22			

(a) SUBTOTAL of Itemized Independent Expenditures.....	58.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 24.86	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3QE40

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 24.52	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3QE58

Full Name (Last, First, Middle Initial) of Payee Budget-Upper Arlington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 34.69	
City Upper Arlington	State OH	Zip Code 43212-1158	
Purpose of Expenditure Rental Van		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3QE66

(a) SUBTOTAL of Itemized Independent Expenditures.....	84.07
(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-Upper Arlington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1917 Northwest Blvd		Amount 15.75	
City Upper Arlington	State OH	Zip Code 43212-1158	Transaction ID : VN7CZA3QE74
Purpose of Expenditure Rental Van	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tyree Bullock		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 607 Homeland Ave		Amount 22.80	
City Durham	State NC	Zip Code 27707-4020	Transaction ID : VN7CZA3NVM8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tyree Bullock		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 607 Homeland Ave		Amount 22.80	
City Durham	State NC	Zip Code 27707-4020	Transaction ID : VN7CZA3NWJ5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	61.35
(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 Tyree Bullock		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 607 Homeland Ave		Amount 22.80	
City Durham	State NC	Zip Code 27707-4020	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3NZC3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Tyree Bullock		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 607 Homeland Ave		Amount 22.80	
City Durham	State NC	Zip Code 27707-4020	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3P0A8
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Holly Burda		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1513 Willomore St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3349	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3PFZ6
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 73119.65		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.....	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 Holly Burda		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1513 Willomore St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3349	Transaction ID : VN7CZA3PHK6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Holly Burda		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1513 Willomore St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3349	Transaction ID : VN7CZA3PPB3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Holly Burda		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1513 Willomore St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3349	Transaction ID : VN7CZA3PQX8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Jaiquan Burgess		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3862 West Ave Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4550	Transaction ID : VN7CZA3PGG0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Jaiquan Burgess		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3862 West Ave Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4550	Transaction ID : VN7CZA3PJ33
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Jaiquan Burgess		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3862 West Ave Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4550	Transaction ID : VN7CZA3PPV0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(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 Jaiquan Burgess		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3862 West Ave Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4550	Transaction ID : VN7CZA3PRD5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marzelle Burgess		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 231 Goat Hill Ln		Amount 17.10	
City Sanford	State NC	Zip Code 27330-9255	Transaction ID : VN7CZA3NCV1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marzelle Burgess		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 231 Goat Hill Ln		Amount 17.10	
City Sanford	State NC	Zip Code 27330-9255	Transaction ID : VN7CZA3NDB7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Marzelle Burgess		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 231 Goat Hill Ln		Amount 17.10	
City Sanford	State NC	Zip Code 27330-9255	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Marzelle Burgess		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 231 Goat Hill Ln		Amount 17.10	
City Sanford	State NC	Zip Code 27330-9255	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Grace Burghoff		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2300 Timberview Rd Apt 107		Amount 44.58	
City Kirkwood	State MO	Zip Code 63122-6753	
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	78.78
(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 Grace Burghoff		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2300 Timberview Rd Apt 107		Amount 44.58	
City Kirkwood	State MO	Zip Code 63122-6753	Transaction ID : VN7CZA3Q650
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jeffery Burton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1443 Matador Dr		Amount 47.06	
City Gotha	State FL	Zip Code 34734-4552	Transaction ID : VN7CZA3NNQ9
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jeffery Burton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1443 Matador Dr		Amount 47.06	
City Gotha	State FL	Zip Code 34734-4552	Transaction ID : VN7CZA3NQK1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(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 Philip Butler		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 22.80	
City Carrboro	State NC	Zip Code 27510-1837	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NVP4

Full Name (Last, First, Middle Initial) of Payee Philip Butler		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 22.80	
City Carrboro	State NC	Zip Code 27510-1837	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NWM1

Full Name (Last, First, Middle Initial) of Payee Philip Butler		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 22.80	
City Carrboro	State NC	Zip Code 27510-1837	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NZE9

(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 Philip Butler		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 104 Mulberry St Apt B		Amount 22.80	
City Carrboro	State NC	Zip Code 27510-1837	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3P0C4

Full Name (Last, First, Middle Initial) of Payee Samir Butt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 737 Melon Ter Apt B		Amount 68.40	
City Philadelphia	State PA	Zip Code 19123-3428	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NK03

Full Name (Last, First, Middle Initial) of Payee Samir Butt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 737 Melon Ter Apt B		Amount 68.40	
City Philadelphia	State PA	Zip Code 19123-3428	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NM46

(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 Rashawn Byrd		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1219 Purcell Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA3PXJ3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rashawn Byrd		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1219 Purcell Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA3PZ30
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rashawn Byrd		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1219 Purcell Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA3Q0M5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.44
(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 Rashawn Byrd		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1219 Purcell Ave		Amount 38.48	
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		515234.22	

Full Name (Last, First, Middle Initial) of Payee Micah Callaway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Full Name (Last, First, Middle Initial) of Payee Micah Callaway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

(a) SUBTOTAL of Itemized Independent Expenditures.....	106.88
(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 Micah Callaway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q0D0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Micah Callaway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q1Y7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Robert Callen		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3415 Pennsylvania Ave		Amount 44.58	
City Saint Louis	State MO	Zip Code 63118-2927	Transaction ID : VN7CZA3Q5D2
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	112.98
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Robert Callen		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3415 Pennsylvania Ave		Amount 44.58	
City Saint Louis	State MO	Zip Code 63118-2927	Transaction ID : VN7CZA3Q683
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA3NFV7
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA3NFW5
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	63.18
(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		Date of Public Distribution/Dissemination 09 / 20 / 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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.90
(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 Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.90
(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 Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Transaction ID : VN7CZA3NG64

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Transaction ID : VN7CZA3NG72

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Transaction ID : VN7CZA3NG80

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.90
(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 Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA3NG98
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA3NGZ0
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement 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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA3NH08
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.90
(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 Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA3NH16
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement 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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA3NH24
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement 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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA3NH31
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.90
(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 Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA3NH49
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA3NH81
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA3NH99
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.90
(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 Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA3NHA7
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement 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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA3NHB5
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement 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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 9.30	
City Raleigh	State NC	Zip Code 27612-3324	Transaction ID : VN7CZA3NHC3
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.90
(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 Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 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: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NHDO

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 14.17	
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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3P169

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 14.17	
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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3P1T7

(a) SUBTOTAL of Itemized Independent Expenditures.....	37.64
(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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 14.17	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Full Name (Last, First, Middle Initial) of Payee Candlewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4433 Lead Mine Rd		Amount 14.17	
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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.04
(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 Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA3P0Z4
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA3P10Z
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA3P17Z
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA3P185
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA3P1J4
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA3P1K2
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA3P1M0
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 73119.65		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA3P1V5
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 73119.65		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA3P1W3
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 73119.65		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA3P3E6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA3P3F4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA3P3G2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA3P3R5
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA3P3S3
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA3P432
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA3P440
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA3P457
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA3P4C3
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Candlewood		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1818 NC-54		Amount 9.70	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA3P4D1
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PXH5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PZ22
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	78.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michaela Carlier		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Carlino		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3729 E 53rd St		Amount 68.40	
City Cleveland	State OH	Zip Code 44105-1118	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 John Carlino		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3729 E 53rd St		Amount 68.40	
City Cleveland	State OH	Zip Code 44105-1118	Transaction ID : VN7CZA3P8T3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		515234.22	

Full Name (Last, First, Middle Initial) of Payee Kelly Casey		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 701 Arlington St		Amount 47.06	
City Orlando	State FL	Zip Code 32805-1413	Transaction ID : VN7CZA3NP41
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: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		23693.00	

Full Name (Last, First, Middle Initial) of Payee Kelly Casey		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 701 Arlington St		Amount 47.06	
City Orlando	State FL	Zip Code 32805-1413	Transaction ID : VN7CZA3NR03
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(a) SUBTOTAL of Itemized Independent Expenditures.....	162.52
(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 Nolan Champer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 66 E Maynard Ave		Amount 72.96	
City Columbus	State OH	Zip Code 43202-2941	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nolan Champer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 66 E Maynard Ave		Amount 72.96	
City Columbus	State OH	Zip Code 43202-2941	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brandon Chatman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4700 Almont Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43229-6302	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	214.32
(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 Brandon Chatman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4700 Almont Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43229-6302	Transaction ID : VN7CZA3QD63
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lena Cheney		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 99 Corbett Ct Apt 218		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15237-3028	Transaction ID : VN7CZA3PBH8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lena Cheney		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 99 Corbett Ct Apt 218		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15237-3028	Transaction ID : VN7CZA3PCR4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Kenneth Cheng		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 89.21	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3NJY8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 89.21	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3NM20
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 178527.38		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Kenneth Cheng		Date of Public Distribution/Dissemination 09 / 20 / 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 : VN7CZA3NNM5
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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.....	190.92
(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 Kenneth Cheng		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2004 Deven Ave N.		Amount 12.50	
City Seattle	State WA	Zip Code 98109	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Reginald Cherubin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1126 Anchor St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1115	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Reginald Cherubin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1126 Anchor St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1115	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Chester BP		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 15.97	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA3PA84
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 16.28	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA3PA92
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 12.94	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA3PAA0
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	45.19
(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 Chester BP		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 11.23	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA3PAB8
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 12.41	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA3PAC6
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 15.97	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA3PAQ2
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.61
(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 Chester BP		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 16.28	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PAR0

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 12.94	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PAS8

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 11.23	
City Cleveland	State OH	Zip Code 44114-4413	
Purpose of Expenditure Gas		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PAT6

(a) SUBTOTAL of Itemized Independent Expenditures.....	40.45
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Chester BP		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2701 Chester Ave Cleveland		Amount 12.41	
City Cleveland	State OH	Zip Code 44114-4413	Transaction ID : VN7CZA3PAV4
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Citgo		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 879 4th Ave		Amount 5.00	
City Coraopolis	State PA	Zip Code 15108-1505	Transaction ID : VN7CZA3PDB4
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Citgo		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 879 4th Ave		Amount 5.00	
City Coraopolis	State PA	Zip Code 15108-1505	Transaction ID : VN7CZA3PDQ9
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: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	22.41
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee City Graphics		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4251 Chippewa St		Amount 119.55	
City Saint Louis	State MO	Zip Code 63116-2607	Transaction ID : VN7CZA3QAM7
Purpose of Expenditure Printing	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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee City Graphics		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4251 Chippewa St		Amount 119.55	
City Saint Louis	State MO	Zip Code 63116-2607	Transaction ID : VN7CZA3QAP3
Purpose of Expenditure Printing	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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Leron Clardy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PX19
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	277.58
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Leron Clardy		Date of Public Distribution/Dissemination 09 / 20 / 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: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3PYJ6

Full Name (Last, First, Middle Initial) of Payee Leron Clardy		Date of Public Distribution/Dissemination 09 / 20 / 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: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3Q031

Full Name (Last, First, Middle Initial) of Payee Leron Clardy		Date of Public Distribution/Dissemination 09 / 20 / 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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3Q1M8

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.44
(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 Clinton Clark		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 22.80	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA3NVJ2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 22.80	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA3NWG9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 22.80	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA3NZA7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Clinton Clark		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 22.80	
City Troutdale	State OR	Zip Code 97060-1776	
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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3P082

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 4.17	
City Troutdale	State OR	Zip Code 97060-1776	
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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3P4X7

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 4.17	
City Troutdale	State OR	Zip Code 97060-1776	
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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3P5B8

(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 Clinton Clark		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 4.17	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA3P6J4
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Clinton Clark		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2350 SW 257th Ave Apt A104		Amount 4.17	
City Troutdale	State OR	Zip Code 97060-1776	Transaction ID : VN7CZA3P6Z6
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Deborah Clark		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 5410 Vista View Ct		Amount 17.10	
City Raleigh	State NC	Zip Code 27612-8710	Transaction ID : VN7CZA3NCF6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	25.44
(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 Deborah Clark		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5410 Vista View Ct		Amount 17.10	
City Raleigh	State NC	Zip Code 27612-8710	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3NCZ3
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		73119.65	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 Deborah Clark		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5410 Vista View Ct		Amount 17.10	
City Raleigh	State NC	Zip Code 27612-8710	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3NEF0
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		837667.61	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 Deborah Clark		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5410 Vista View Ct		Amount 17.10	
City Raleigh	State NC	Zip Code 27612-8710	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3NEZ6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		837667.61	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.....	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 Marion Clarke		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6830 Grace Ave		Amount 49.56	
City North College Hill	State OH	Zip Code 45239-4831	Transaction ID : VN7CZA3PXT6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marion Clarke		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6830 Grace Ave		Amount 49.56	
City North College Hill	State OH	Zip Code 45239-4831	Transaction ID : VN7CZA3PZB3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marion Clarke		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6830 Grace Ave		Amount 49.56	
City North College Hill	State OH	Zip Code 45239-4831	Transaction ID : VN7CZA3Q0W9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	148.68
(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 Marion Clarke		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 6830 Grace Ave		Amount 49.56	
City North College Hill	State OH	Zip Code 45239-4831	Transaction ID : VN7CZA3Q2D6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Christina Clement		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 5130 Theodore St		Amount 68.40	
City Maple Heights	State OH	Zip Code 44137-1330	Transaction ID : VN7CZA3P8C2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Christina Clement		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 5130 Theodore St		Amount 68.40	
City Maple Heights	State OH	Zip Code 44137-1330	Transaction ID : VN7CZA3P9V1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	186.36
(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 Portia Cochrum		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PXD4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Portia Cochrum		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PYY1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Portia Cochrum		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q0F6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.44
(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 Portia Cochrum		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q203
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cogo's 450		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1610 Gringo Rd		Amount 18.11	
City Aliquippa	State PA	Zip Code 15001-5847	Transaction ID : VN7CZA3PDA6
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cogo's 450		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1610 Gringo Rd		Amount 18.11	
City Aliquippa	State PA	Zip Code 15001-5847	Transaction ID : VN7CZA3PDP1
Purpose of Expenditure Gas	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	74.70
(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 Justin Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1026 Clinard Ave		Amount 22.80	
City High Point	State NC	Zip Code 27265-3142	Transaction ID : VN7CZA3PFN9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Justin Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1026 Clinard Ave		Amount 22.80	
City High Point	State NC	Zip Code 27265-3142	Transaction ID : VN7CZA3PH97
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Justin Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1026 Clinard Ave		Amount 22.80	
City High Point	State NC	Zip Code 27265-3142	Transaction ID : VN7CZA3PP24
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Justin Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1026 Clinard Ave		Amount 22.80	
City High Point	State NC	Zip Code 27265-3142	Transaction ID : VN7CZA3PQM7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maurice Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3327 W. 6th Ave.		Amount 22.80	
City Minneapolis	State MN	Zip Code 55412	Transaction ID : VN7CZA3PFR2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maurice Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3327 W. 6th Ave.		Amount 22.80	
City Minneapolis	State MN	Zip Code 55412	Transaction ID : VN7CZA3PHC1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Maurice Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3327 W. 6th Ave.		Amount 22.80	
City Minneapolis	State MN	Zip Code 55412	Transaction ID : VN7CZA3PP56
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maurice Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3327 W. 6th Ave.		Amount 22.80	
City Minneapolis	State MN	Zip Code 55412	Transaction ID : VN7CZA3PQQ1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maurice Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3327 W. 6th Ave.		Amount 4.17	
City Minneapolis	State MN	Zip Code 55412	Transaction ID : VN7CZA3PVK8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.77
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Maurice Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3327 W. 6th Ave.		Amount 4.17	
City Minneapolis	State MN	Zip Code 55412	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PVT4

Full Name (Last, First, Middle Initial) of Payee Maurice Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3327 W. 6th Ave.		Amount 4.08	
City Minneapolis	State MN	Zip Code 55412	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PWF7

Full Name (Last, First, Middle Initial) of Payee Maurice Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3327 W. 6th Ave.		Amount 4.08	
City Minneapolis	State MN	Zip Code 55412	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PWP2

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.33
(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 Malcolm Coleman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2050 Judith Pl		Amount 10.69	
City Longwood	State FL	Zip Code 32779-2780	Transaction ID : VN7CZA3NQ42
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Malcolm Coleman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2050 Judith Pl		Amount 10.69	
City Longwood	State FL	Zip Code 32779-2780	Transaction ID : VN7CZA3NS06
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Austin Collett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PY04
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	55.58
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Austin Collett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PZH9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Austin Collett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q126
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Austin Collett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q2K3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Malcolm Collins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 336 Eddy Rd Apt 12		Amount 68.40	
City Cleveland	State OH	Zip Code 44108-1638	Transaction ID : VN7CZA3P7Y1
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Malcolm Collins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 336 Eddy Rd Apt 12		Amount 68.40	
City Cleveland	State OH	Zip Code 44108-1638	Transaction ID : VN7CZA3P9D3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Collins-Muhammad		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4210 Fair Ave		Amount 38.60	
City Saint Louis	State MO	Zip Code 63115-3066	Transaction ID : VN7CZA3Q5F8
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	175.40
(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 John Collins-Muhammad		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4210 Fair Ave		Amount 38.60	
City Saint Louis	State MO	Zip Code 63115-3066	Transaction ID : VN7CZA3Q6A9
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Comfort Suites Airport Greensboro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7619 Thorndike Rd		Amount 17.62	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PRJ4
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Comfort Suites Airport Greensboro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7619 Thorndike Rd		Amount 17.62	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PS21
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	73.84
(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 Comfort Suites Airport Greensboro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7619 Thorndike Rd		Amount 17.27	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PTJ8
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Comfort Suites Airport Greensboro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7619 Thorndike Rd		Amount 17.27	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PV24
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Conway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 115 Cecil St SE		Amount 6.25	
City Minneapolis	State MN	Zip Code 55414-3610	Transaction ID : VN7CZA3Q4Z1
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	40.79
(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 Michael Conway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 115 Cecil St SE		Amount 6.25	
City Minneapolis	State MN	Zip Code 55414-3610	
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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Michael Conway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 115 Cecil St SE		Amount 6.25	
City Minneapolis	State MN	Zip Code 55414-3610	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Michael Conway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 115 Cecil St SE		Amount 6.25	
City Minneapolis	State MN	Zip Code 55414-3610	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Ryan Cook		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7029 Talbot Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32819-7440	Transaction ID : VN7CZA3NPQ1
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ryan Cook		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7029 Talbot Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32819-7440	Transaction ID : VN7CZA3NRK3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Divine Cooper		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA3PFK3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Divine Cooper		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA3PH72
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Divine Cooper		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA3PP08
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Divine Cooper		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA3PQJ1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Nathalie Cooper		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA3PFY8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathalie Cooper		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA3PHJ9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathalie Cooper		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA3PPA5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Nathalie Cooper		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 223 Heritage Creek Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-4781	Transaction ID : VN7CZA3PQW0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tyrone Copeland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PYA3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tyrone Copeland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PZV8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Tyrone Copeland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q1C5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tyrone Copeland		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q2X0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Terry Coplin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4802 SW 134th Loop		Amount 34.20	
City Ocala	State FL	Zip Code 34473-5270	Transaction ID : VN7CZA3NPD2
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		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 Terry Coplin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4802 SW 134th Loop		Amount 34.20	
City Ocala	State FL	Zip Code 34473-5270	Transaction ID : VN7CZA3NRA2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Isaac Cowan-Page		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2130 Vantine St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15221-1138	Transaction ID : VN7CZA3PB53
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Isaac Cowan-Page		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2130 Vantine St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15221-1138	Transaction ID : VN7CZA3PCC1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Brittany Cox		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PY12
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brittany Cox		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PJ7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brittany Cox		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q134
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Brittany Cox		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		515234.22	

Full Name (Last, First, Middle Initial) of Payee Keith Crawford		Date of Public Distribution/Dissemination 09 / 20 / 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: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Full Name (Last, First, Middle Initial) of Payee Keith Crawford		Date of Public Distribution/Dissemination 09 / 20 / 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: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		178527.38	

(a) SUBTOTAL of Itemized Independent Expenditures.....	188.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 16		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4706 Apex Highway		Amount 3.84	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA3P1A1
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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 16		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4706 Apex Highway		Amount 3.84	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA3P1Y9
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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement 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 16		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4706 Apex Highway		Amount 3.84	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA3P3V8
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	11.52
(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 Cruizers 16		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 4706 Apex Highway		Amount 3.84	
City Durham	State NC	Zip Code 27713	Transaction ID : VN7CZA3P4F6
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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Francisco Cruz		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 668 N 6th St		Amount 34.20	
City Wood River	State IL	Zip Code 62095-1638	Transaction ID : VN7CZA3Q5Z2
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Francisco Cruz		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 668 N 6th St		Amount 34.20	
City Wood River	State IL	Zip Code 62095-1638	Transaction ID : VN7CZA3Q6T6
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(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 Jude Daceus		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2562 Cinderlane Parkway		Amount 34.20	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA3NPC5
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jude Daceus		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2562 Cinderlane Parkway		Amount 34.20	
City Orlando	State FL	Zip Code 32808	Transaction ID : VN7CZA3NR87
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Paul Dale		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 105 Newcastle Dr		Amount 34.20	
City Fairview Heights	State IL	Zip Code 62208-2651	Transaction ID : VN7CZA3Q5R7
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Paul Dale		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 105 Newcastle Dr		Amount 34.20	
City Fairview Heights	State IL	Zip Code 62208-2651	Transaction ID : VN7CZA3Q6K0
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Scott Davidson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10588 Septney Ave NW		Amount 68.40	
City Uniontown	State OH	Zip Code 44685	Transaction ID : VN7CZA3P7G1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Scott Davidson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10588 Septney Ave NW		Amount 68.40	
City Uniontown	State OH	Zip Code 44685	Transaction ID : VN7CZA3P8Z2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Justin Davis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 353 Montrose Dr Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1149	Transaction ID : VN7CZA3PGJ6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Justin Davis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 353 Montrose Dr Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1149	Transaction ID : VN7CZA3PJ59
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Justin Davis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 353 Montrose Dr Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1149	Transaction ID : VN7CZA3PPX5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(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 Justin Davis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 353 Montrose Dr Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1149	Transaction ID : VN7CZA3PRF0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cory Dawson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3878 W 36th St Down		Amount 68.40	
City Cleveland	State OH	Zip Code 44109-2716	Transaction ID : VN7CZA3P770
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cory Dawson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3878 W 36th St Down		Amount 68.40	
City Cleveland	State OH	Zip Code 44109-2716	Transaction ID : VN7CZA3P8P1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Miranda Dean		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 40 Rowland Ave		Amount 99.07	
City Delaware	State OH	Zip Code 43015-2313	Transaction ID : VN7CZA3QAT5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Miranda Dean		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 40 Rowland Ave		Amount 99.07	
City Delaware	State OH	Zip Code 43015-2313	Transaction ID : VN7CZA3QC45
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joseph Debow		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 471 Clearview Dr Apt 6		Amount 68.40	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA3P7T0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	266.54
(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 Joseph Debow		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 471 Clearview Dr Apt 6		Amount 68.40	
City Euclid	State OH	Zip Code 44123-2037	Transaction ID : VN7CZA3P991
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Laurel Dennie		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5796 Shannon Place Ln		Amount 68.40	
City Dublin	State OH	Zip Code 43016-4199	Transaction ID : VN7CZA3QBX1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Laurel Dennie		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5796 Shannon Place Ln		Amount 68.40	
City Dublin	State OH	Zip Code 43016-4199	Transaction ID : VN7CZA3QD71
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Tabitha Diaz		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6101 Metrowest Blvd Apt 103		Amount 34.20	
City Orlando	State FL	Zip Code 32835-2954	Transaction ID : VN7CZA3NPM8
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: Marco Rubio		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tabitha Diaz		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6101 Metrowest Blvd Apt 103		Amount 34.20	
City Orlando	State FL	Zip Code 32835-2954	Transaction ID : VN7CZA3NQJ3
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tabitha Diaz		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6101 Metrowest Blvd Apt 103		Amount 34.20	
City Orlando	State FL	Zip Code 32835-2954	Transaction ID : VN7CZA3NRG0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Tabitha Diaz		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6101 Metrowest Blvd Apt 103		Amount 34.20	
City Orlando	State FL	Zip Code 32835-2954	Transaction ID : VN7CZA3NSE7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 49.56	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PWY5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 49.56	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PYF2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	133.32
(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 Erika Diloreto		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 49.56	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q007

Full Name (Last, First, Middle Initial) of Payee Erika Diloreto		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 49.56	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q1H4

Full Name (Last, First, Middle Initial) of Payee Madison Dines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 22.80	
City Milwaukie	State OR	Zip Code 97222-6184	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PGA3

(a) SUBTOTAL of Itemized Independent Expenditures.....	121.92
(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 Madison Dines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 22.80	
City Milwaukie	State OR	Zip Code 97222-6184	Transaction ID : VN7CZA3PHX5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Madison Dines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 22.80	
City Milwaukie	State OR	Zip Code 97222-6184	Transaction ID : VN7CZA3PPN2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Madison Dines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 22.80	
City Milwaukie	State OR	Zip Code 97222-6184	Transaction ID : VN7CZA3PR77
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Madison Dines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 4.17	
City Milwaukie	State OR	Zip Code 97222-6184	Transaction ID : VN7CZA3PVM6
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Madison Dines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 4.17	
City Milwaukie	State OR	Zip Code 97222-6184	Transaction ID : VN7CZA3PVV2
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Madison Dines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 4.08	
City Milwaukie	State OR	Zip Code 97222-6184	Transaction ID : VN7CZA3PWG5
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.42
(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 Madison Dines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13700 SE Fernridge Ave		Amount 4.08	
City Milwaukie	State OR	Zip Code 97222-6184	Transaction ID : VN7CZA3PWQ0
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Fred Dost		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 8939 Latrec Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32819-7300	Transaction ID : VN7CZA3NQ01
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Fred Dost		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 8939 Latrec Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32819-7300	Transaction ID : VN7CZA3NRW5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.48
(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 Anthony Dotson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 42.75	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3PXG7
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Anthony Dotson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 42.75	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3PZ14
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Anthony Dotson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 42.75	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3Q0J0
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 515234.22		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.....	128.25
(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 Anthony Dotson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 42.75	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q237
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Duncan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 105 S Watt St		Amount 68.40	
City Chillicothe	State OH	Zip Code 45601-3570	Transaction ID : VN7CZA3QAX8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Duncan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 105 S Watt St		Amount 68.40	
City Chillicothe	State OH	Zip Code 45601-3570	Transaction ID : VN7CZA3QC78
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	179.55
(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 Theresa Dunn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1377 Genessee Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43211-1434	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Theresa Dunn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1377 Genessee Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43211-1434	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 William Eachus		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA3NWA2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA3NZ40
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Eachus		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 514 Brighton Rd		Amount 22.80	
City Durham	State NC	Zip Code 27707-4625	Transaction ID : VN7CZA3P027
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Kimberly Early		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 49.56	
City Cincinnati	State OH	Zip Code 45219-1968	Transaction ID : VN7CZA3PXW2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kimberly Early		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 49.56	
City Cincinnati	State OH	Zip Code 45219-1968	Transaction ID : VN7CZA3PZD9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kimberly Early		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 49.56	
City Cincinnati	State OH	Zip Code 45219-1968	Transaction ID : VN7CZA3Q0Y4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	148.68
(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 Kimberly Early		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2334 W Clifton Ave Apt 5		Amount 49.56	
City Cincinnati	State OH	Zip Code 45219-1968	Transaction ID : VN7CZA3Q2F1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Charles Ebert		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2123 Sidney St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15203-1910	Transaction ID : VN7CZA3PBZ8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Charles Ebert		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2123 Sidney St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15203-1910	Transaction ID : VN7CZA3PD65
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	186.36
(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 Chiamaka Echeazu		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6517 Leschen Ave		Amount 34.20	
City Saint Louis	State MO	Zip Code 63121-5713	Transaction ID : VN7CZA3Q626
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Chiamaka Echeazu		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6517 Leschen Ave		Amount 34.20	
City Saint Louis	State MO	Zip Code 63121-5713	Transaction ID : VN7CZA3Q6X9
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Felicia Echols		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2824 N Judson St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-2016	Transaction ID : VN7CZA3NKE4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Felicia Echols		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2824 N Judson St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-2016	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NMJ6

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4714 Lee Ave		Amount 28.50	
City Saint Louis	State MO	Zip Code 63115-2108	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NV33

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4714 Lee Ave		Amount 28.50	
City Saint Louis	State MO	Zip Code 63115-2108	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NW10

(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 Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4714 Lee Ave		Amount 28.50	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA3NYV8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4714 Lee Ave		Amount 28.50	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA3NZS5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA3P4M6
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	61.17
(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 Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA3P527
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA3P6A3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sequoi Edwards		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4714 Lee Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2108	Transaction ID : VN7CZA3P6Q3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Jacob Ehrlich		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 406 Kent Dr		Amount 17.10	
City Cary	State NC	Zip Code 27511-3105	Transaction ID : VN7CZA3NCP2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jacob Ehrlich		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 406 Kent Dr		Amount 17.10	
City Cary	State NC	Zip Code 27511-3105	Transaction ID : VN7CZA3ND68
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jacob Ehrlich		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 406 Kent Dr		Amount 17.10	
City Cary	State NC	Zip Code 27511-3105	Transaction ID : VN7CZA3NEP5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Jacob Ehrlich		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 406 Kent Dr		Amount 17.10	
City Cary	State NC	Zip Code 27511-3105	Transaction ID : VN7CZA3NF62
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Angelina Ekis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 479 Summerwalk Cir		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27517-8685	Transaction ID : VN7CZA3NV67
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Angelina Ekis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 479 Summerwalk Cir		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27517-8685	Transaction ID : VN7CZA3NW44
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <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 Angelina Ekis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 479 Summerwalk Cir		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27517-8685	Transaction ID : VN7CZA3NYY2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Angelina Ekis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 479 Summerwalk Cir		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27517-8685	Transaction ID : VN7CZA3NZW9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Abdallah El Hamawi		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 47.06	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA3NP91
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	92.66
(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 Abdallah El Hamawi		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 47.06	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA3NR53
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Youssef El Hamawi		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 47.06	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA3NPX7
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Youssef El Hamawi		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13726 Guildhall Cir		Amount 47.06	
City Orlando	State FL	Zip Code 32828-8216	Transaction ID : VN7CZA3NRS1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <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 Mulai El		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3510 Mantua Avwe		Amount 68.40	
City Philadelphia	State PA	Zip Code 19104	Transaction ID : VN7CZA3NJW2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mulai El		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3510 Mantua Avwe		Amount 68.40	
City Philadelphia	State PA	Zip Code 19104	Transaction ID : VN7CZA3NM04
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jared Elick		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1442 Bayshore Dr Apt 1D		Amount 68.40	
City Columbus	State OH	Zip Code 43204-3840	Transaction ID : VN7CZA3QAW1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Jared Elick		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1442 Bayshore Dr Apt 1D		Amount 68.40	
City Columbus	State OH	Zip Code 43204-3840	Transaction ID : VN7CZA3QC60
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kyle Euype		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1222 W Clifton Blvd		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1053	Transaction ID : VN7CZA3P831
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kyle Euype		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1222 W Clifton Blvd		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1053	Transaction ID : VN7CZA3P9J2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Jashala Evans		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA3NVF8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jashala Evans		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA3NWD5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jashala Evans		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA3NZ73
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Jashala Evans		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1801 Fayetteville St Dorm 514		Amount 22.80	
City Durham	State NC	Zip Code 27707-3129	Transaction ID : VN7CZA3P050
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 11252 Lone Eagle Dr		Amount 15.20	
City Bridgeton	State MO	Zip Code 63044-2739	Transaction ID : VN7CZA3Q8V9
Purpose of Expenditure Lodging	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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Extended Stay America		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 11252 Lone Eagle Dr		Amount 15.20	
City Bridgeton	State MO	Zip Code 63044-2739	Transaction ID : VN7CZA3Q8W5
Purpose of Expenditure Lodging	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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	53.20
(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 Extended Stay America		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 11252 Lone Eagle Dr		Amount 15.20	
City Bridgeton	State MO	Zip Code 63044-2739	Transaction ID : VN7CZA3Q998
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Extended Stay America		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 11252 Lone Eagle Dr		Amount 15.20	
City Bridgeton	State MO	Zip Code 63044-2739	Transaction ID : VN7CZA3Q9A6
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: MO District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Kollin Faessler		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5926 Mausser Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-2922	Transaction ID : VN7CZA3NP59
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	64.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Kollin Faessler		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5926 Mausser Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-2922	Transaction ID : VN7CZA3NR11
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shawn Fennell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1512 Superior Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-2726	Transaction ID : VN7CZA3PBV7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shawn Fennell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1512 Superior Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-2726	Transaction ID : VN7CZA3PD23
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Antoine Ferguson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5080 Lee Rd Apt 2		Amount 68.40	
City Maple Heights	State OH	Zip Code 44137-1257	Transaction ID : VN7CZA3P8A6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Antoine Ferguson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5080 Lee Rd Apt 2		Amount 68.40	
City Maple Heights	State OH	Zip Code 44137-1257	Transaction ID : VN7CZA3P9S5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jeremy Ferguson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2445 Columbus Lancaster Rd NW		Amount 68.40	
City Lancaster	State OH	Zip Code 43130-5714	Transaction ID : VN7CZA3QBV5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Jeremy Ferguson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2445 Columbus Lancaster Rd NW		Amount 68.40	
City Lancaster	State OH	Zip Code 43130-5714	Transaction ID : VN7CZA3QD55
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jennifer Fidele		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4302 Meadowbrook Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32808-2136	Transaction ID : VN7CZA3NPW9
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jennifer Fidele		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4302 Meadowbrook Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32808-2136	Transaction ID : VN7CZA3NRR3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Paul Filippelli		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2448 Ravenel Dr		Amount 77.20	
City Columbus	State OH	Zip Code 43209-3307	Transaction ID : VN7CZA3QBN8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Paul Filippelli		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2448 Ravenel Dr		Amount 77.20	
City Columbus	State OH	Zip Code 43209-3307	Transaction ID : VN7CZA3QCZ8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Finn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1518 Oakwood Dr		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15234-1012	Transaction ID : VN7CZA3PBB0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	222.80
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee John Finn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1518 Oakwood Dr		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15234-1012	Transaction ID : VN7CZA3PCJ9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lisa Flagella		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 16619 Thompson Rd		Amount 68.40	
City Thompson	State OH	Zip Code 44086-8744	Transaction ID : VN7CZA3P8D0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lisa Flagella		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 16619 Thompson Rd		Amount 68.40	
City Thompson	State OH	Zip Code 44086-8744	Transaction ID : VN7CZA3P9W9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Venita Flippen		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1229 Downing Rd		Amount 17.10	
City Raleigh	State NC	Zip Code 27610-1011	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Transaction ID : VN7CZA3NCW9

Full Name (Last, First, Middle Initial) of Payee Venita Flippen		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1229 Downing Rd		Amount 17.10	
City Raleigh	State NC	Zip Code 27610-1011	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Transaction ID : VN7CZA3NDC5

Full Name (Last, First, Middle Initial) of Payee Venita Flippen		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1229 Downing Rd		Amount 17.10	
City Raleigh	State NC	Zip Code 27610-1011	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3NEW3

(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 Venita Flippen		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1229 Downing Rd		Amount 17.10	
City Raleigh	State NC	Zip Code 27610-1011	Transaction ID : VN7CZA3NFC9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.17	
City Seattle	State WA	Zip Code 98105-1745	Transaction ID : VN7CZA3PVP2
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.17	
City Seattle	State WA	Zip Code 98105-1745	Transaction ID : VN7CZA3PVX7
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	25.44
(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 Joshua Fredman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.08	
City Seattle	State WA	Zip Code 98105-1745	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Joshua Fredman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 820 NE 45th St Ste 2		Amount 4.08	
City Seattle	State WA	Zip Code 98105-1745	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee A'montreal Frost		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2009 Westbrook Village Dr		Amount 21.38	
City Columbus	State OH	Zip Code 43228-3686	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29.54
(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 A'montreal Frost		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2009 Westbrook Village Dr		Amount 21.38	
City Columbus	State OH	Zip Code 43228-3686	Transaction ID : VN7CZA3QDA5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tahira Fuentes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA3PFG9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tahira Fuentes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA3PH48
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	66.98
(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 Tahira Fuentes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA3PNX5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tahira Fuentes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA3PQF8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Aricka Gaddy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7 Shearly Ceasar Dt		Amount 22.80	
City Durham	State NC	Zip Code 27701	Transaction ID : VN7CZA3NVZ5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Aricka Gaddy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7 Shearly Ceasar Dt		Amount 22.80	
City Durham	State NC	Zip Code 27701	Transaction ID : VN7CZA3NWX2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Aricka Gaddy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7 Shearly Ceasar Dt		Amount 22.80	
City Durham	State NC	Zip Code 27701	Transaction ID : VN7CZA3NZQ0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Aricka Gaddy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7 Shearly Ceasar Dt		Amount 22.80	
City Durham	State NC	Zip Code 27701	Transaction ID : VN7CZA3P0N5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Deanna Garrett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 49.56	
City Fort Thomas	State KY	Zip Code 41075-2520	Transaction ID : VN7CZA3PWX7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Deanna Garrett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 49.56	
City Fort Thomas	State KY	Zip Code 41075-2520	Transaction ID : VN7CZA3PYE4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Deanna Garrett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 49.56	
City Fort Thomas	State KY	Zip Code 41075-2520	Transaction ID : VN7CZA3PZZ9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	148.68
(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 Deanna Garrett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Alexandria Pike		Amount 49.56	
City Fort Thomas	State KY	Zip Code 41075-2520	Transaction ID : VN7CZA3Q1G7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 38.48	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA3PX01
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 38.48	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA3PYH8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	126.52
(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 Steven Garrett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 38.48	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA3Q023
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Steven Garrett		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4641 Bardwell Buford Rd		Amount 38.48	
City Mount Orab	State OH	Zip Code 45154-9322	Transaction ID : VN7CZA3Q1K0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jennifer Geddis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1101 Willowedge Ct		Amount 17.10	
City Knightdale	State NC	Zip Code 27545-8673	Transaction ID : VN7CZA3NCK8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	94.06
(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 Jennifer Geddis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1101 Willowedge Ct		Amount 17.10	
City Knightdale	State NC	Zip Code 27545-8673	Transaction ID : VN7CZA3ND34
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jennifer Geddis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1101 Willowedge Ct		Amount 17.10	
City Knightdale	State NC	Zip Code 27545-8673	Transaction ID : VN7CZA3NEK1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jennifer Geddis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1101 Willowedge Ct		Amount 17.10	
City Knightdale	State NC	Zip Code 27545-8673	Transaction ID : VN7CZA3NF38
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Temeisha Gibson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2202 Jones Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4920	Transaction ID : VN7CZA3PF29
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Temeisha Gibson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2202 Jones Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4920	Transaction ID : VN7CZA3PGP7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Temeisha Gibson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2202 Jones Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4920	Transaction ID : VN7CZA3PNF4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Temeisha Gibson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2202 Jones Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-4920	Transaction ID : VN7CZA3PQ17
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 134 W 107th St		Amount 22.80	
City Chicago	State IL	Zip Code 60628-3437	Transaction ID : VN7CZA3NV91
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 134 W 107th St		Amount 22.80	
City Chicago	State IL	Zip Code 60628-3437	Transaction ID : VN7CZA3NW78
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Victoria Gill		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 134 W 107th St		Amount 22.80	
City Chicago	State IL	Zip Code 60628-3437	Transaction ID : VN7CZA3NZ16
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 134 W 107th St		Amount 22.80	
City Chicago	State IL	Zip Code 60628-3437	Transaction ID : VN7CZA3NZZ3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 134 W 107th St		Amount 4.17	
City Chicago	State IL	Zip Code 60628-3437	Transaction ID : VN7CZA3P4G4
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.77
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Victoria Gill		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 134 W 107th St		Amount 4.17	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA3P4Y5
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		73119.65	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 Victoria Gill		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 134 W 107th St		Amount 4.17	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA3P661
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		837667.61	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 Victoria Gill		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 134 W 107th St		Amount 4.17	
City Chicago	State IL	Zip Code 60628-3437	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA3P6K2
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		837667.61	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Detiste Gilmer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 115 McCormick St.		Amount 22.80	
City Greensboro	State NC	Zip Code 27403	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3PF60
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		73119.65	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Detiste Gilmer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 115 McCormick St.		Amount 22.80	
City Greensboro	State NC	Zip Code 27403	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3PGT9
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		73119.65	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Detiste Gilmer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 115 McCormick St.		Amount 22.80	
City Greensboro	State NC	Zip Code 27403	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3PNK6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		837667.61	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 Detiste Gilmer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 115 McCormick St.		Amount 22.80	
City Greensboro	State NC	Zip Code 27403	Transaction ID : VN7CZA3PQ59
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Alyssa Goidich		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA3NVV3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Alyssa Goidich		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA3NWS0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Alyssa Goidich		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA3NZK8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Alyssa Goidich		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3014 Spearfish Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28306-7901	Transaction ID : VN7CZA3P0H3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Aqueelah Goins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1647 Elsinore Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44112-3815	Transaction ID : VN7CZA3P7K4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Aqueelah Goins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1647 Elsinore Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44112-3815	Transaction ID : VN7CZA3P926
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Steven Gomera		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12127 Green Badger Ln		Amount 34.20	
City Orlando	State FL	Zip Code 32817-3564	Transaction ID : VN7CZA3NPF8
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Steven Gomera		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12127 Green Badger Ln		Amount 34.20	
City Orlando	State FL	Zip Code 32817-3564	Transaction ID : VN7CZA3NRC8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 James Gouine		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3242 Tumwater Valley Dr		Amount 72.96	
City Pickerington	State OH	Zip Code 43147-9831	Transaction ID : VN7CZA3QBR2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Gouine		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3242 Tumwater Valley Dr		Amount 72.96	
City Pickerington	State OH	Zip Code 43147-9831	Transaction ID : VN7CZA3QD22
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Racheal Green		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 527 N Negley Ave Apt 3		Amount 69.35	
City Pittsburgh	State PA	Zip Code 15206-2445	Transaction ID : VN7CZA3PAZ6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	215.27
(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 Racheal Green		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 527 N Negley Ave Apt 3		Amount 69.35	
City Pittsburgh	State PA	Zip Code 15206-2445	Transaction ID : VN7CZA3PC64
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Greene		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 417 Moline St		Amount 28.50	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA3NV75
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Greene		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 417 Moline St		Amount 28.50	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA3NW52
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	126.35
(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 Rose Greene		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 417 Moline St		Amount 28.50	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA3NYZ0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Greene		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 417 Moline St		Amount 28.50	
City Durham	State NC	Zip Code 27707-2347	Transaction ID : VN7CZA3NZX7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee William Greene		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 36 E Montana St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-2210	Transaction ID : VN7CZA3NJX0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 William Greene		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 36 E Montana St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19119-2210	Transaction ID : VN7CZA3NM12
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		178527.38	

Full Name (Last, First, Middle Initial) of Payee Joshua Griffin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PY87
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

Full Name (Last, First, Middle Initial) of Payee Joshua Griffin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PZS2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(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 Joshua Griffin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q1A9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joshua Griffin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q2V4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moesha Griffin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4018 McIntosh St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2292	Transaction ID : VN7CZA3PG79
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Moesha Griffin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4018 McIntosh St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2292	Transaction ID : VN7CZA3PHV0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moesha Griffin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4018 McIntosh St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2292	Transaction ID : VN7CZA3PPK6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moesha Griffin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4018 McIntosh St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2292	Transaction ID : VN7CZA3PR51
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 John Griffith		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5389 Shannon Ln		Amount 68.40	
City Columbus	State OH	Zip Code 43235-7294	Transaction ID : VN7CZA3QB60
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Griffith		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5389 Shannon Ln		Amount 68.40	
City Columbus	State OH	Zip Code 43235-7294	Transaction ID : VN7CZA3QCG9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA3NVD2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Thomas Grossi		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA3NWB9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA3NZ57
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Grossi		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2293 Marthas Chapel Rd		Amount 22.80	
City Apex	State NC	Zip Code 27523-5675	Transaction ID : VN7CZA3P034
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Nicholas Grubbs		Date of Public Distribution/Dissemination 09 / 20 / 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: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nicholas Grubbs		Date of Public Distribution/Dissemination 09 / 20 / 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: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nicholas Grubbs		Date of Public Distribution/Dissemination 09 / 20 / 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: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.44
(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 Nicholas Grubbs		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q1N6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		515234.22	

Full Name (Last, First, Middle Initial) of Payee Ian Haffling		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 917 McCandless Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15201-2451	Transaction ID : VN7CZA3PBG0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

Full Name (Last, First, Middle Initial) of Payee Ian Haffling		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 917 McCandless Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15201-2451	Transaction ID : VN7CZA3PCQ8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		178527.38	

(a) SUBTOTAL of Itemized Independent Expenditures.....	175.28
(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 Allen Hafford		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PX76
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Hafford		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PYR3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Hafford		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q098
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.44
(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 Allen Hafford		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q1T6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Haines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 24.77	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA3NCQ9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Haines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 24.77	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA3ND76
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	88.02
(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 Jonathan Haines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 24.77	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA3NEQ3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Haines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 24.77	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA3NF79
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Haines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 3.13	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA3NHR7
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Jonathan Haines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 3.13	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA3NHZ3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Jonathan Haines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 3.13	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA3NJH5
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

Full Name (Last, First, Middle Initial) of Payee Jonathan Haines		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3034 Bloomington Ave		Amount 3.13	
City Minneapolis	State MN	Zip Code 55407-1716	Transaction ID : VN7CZA3NJQ2
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(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 Ahmad Hamdan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2006 Lowrie St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-3227	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3PC14
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Ahmad Hamdan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2006 Lowrie St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-3227	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3PD80
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Maurice Hamilton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3241 Rowena Ave		Amount 22.80	
City Durham	State NC	Zip Code 27703-4448	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3NW03
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 73119.65		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.....	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 Maurice Hamilton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3241 Rowena Ave		Amount 22.80	
City Durham	State NC	Zip Code 27703-4448	Transaction ID : VN7CZA3NWX0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Maurice Hamilton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3241 Rowena Ave		Amount 22.80	
City Durham	State NC	Zip Code 27703-4448	Transaction ID : VN7CZA3NZR8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Maurice Hamilton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3241 Rowena Ave		Amount 22.80	
City Durham	State NC	Zip Code 27703-4448	Transaction ID : VN7CZA3P0P3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Conrad Hampton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3461 Shadeland Ave		Amount 89.16	
City Pittsburgh	State PA	Zip Code 15212-2253	Transaction ID : VN7CZA3PBR3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Conrad Hampton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3461 Shadeland Ave		Amount 89.16	
City Pittsburgh	State PA	Zip Code 15212-2253	Transaction ID : VN7CZA3PCZ9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Margaret Hane		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 334 Pearl St Fl 2		Amount 99.07	
City Pittsburgh	State PA	Zip Code 15224-1953	Transaction ID : VN7CZA3PBS1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	277.39
(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 Margaret Hane		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 334 Pearl St FI 2		Amount 99.07	
City Pittsburgh	State PA	Zip Code 15224-1953	Transaction ID : VN7CZA3PD07
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Hanratty		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 15014 London Rd		Amount 68.40	
City Philadelphia	State PA	Zip Code 19116-1517	Transaction ID : VN7CZA3NKQ5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Hanratty		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 15014 London Rd		Amount 68.40	
City Philadelphia	State PA	Zip Code 19116-1517	Transaction ID : VN7CZA3NMW5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	235.87
(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 Carolyn Happer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2815 Briar Park Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32833-5521	Transaction ID : VN7CZA3NPS7
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Carolyn Happer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2815 Briar Park Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32833-5521	Transaction ID : VN7CZA3NRN9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Justin Harlem		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1010 N Hancock St Apt 210		Amount 77.20	
City Philadelphia	State PA	Zip Code 19123-2327	Transaction ID : VN7CZA3NKB0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Justin Harlem		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1010 N Hancock St Apt 210		Amount 77.20	
City Philadelphia	State PA	Zip Code 19123-2327	Transaction ID : VN7CZA3NMF3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Connor Harney		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 8207 Creek Glen Way		Amount 22.80	
City Apex	State NC	Zip Code 27502-4218	Transaction ID : VN7CZA3NVN6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Connor Harney		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 8207 Creek Glen Way		Amount 22.80	
City Apex	State NC	Zip Code 27502-4218	Transaction ID : VN7CZA3NWK3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	122.80
(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 Connor Harney		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 8207 Creek Glen Way		Amount 22.80	
City Apex	State NC	Zip Code 27502-4218	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3NZD1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Connor Harney		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 8207 Creek Glen Way		Amount 22.80	
City Apex	State NC	Zip Code 27502-4218	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3P0B6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ginger Harris		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 42 Woodlawn Cir		Amount 34.20	
City Belleville	State IL	Zip Code 62226-7576	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3Q5J2
Name of Federal Candidate Supported or Opposed by Expenditure: Roy Blunt		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 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.....	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 Ginger Harris		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 42 Woodlawn Cir		Amount 34.20	
City Belleville	State IL	Zip Code 62226-7576	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3Q6D3
Name of Federal Candidate Supported or Opposed by Expenditure: Jason Kander		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 5548.09		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 Tyler Harris		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2437 Robertson Ave		Amount 45.60	
City Cincinnati	State OH	Zip Code 45212-3410	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3PXY8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		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 837667.61		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 Tyler Harris		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2437 Robertson Ave		Amount 45.60	
City Cincinnati	State OH	Zip Code 45212-3410	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3PZF5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		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 837667.61		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.....	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 Tyler Harris		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2437 Robertson Ave		Amount 45.60	
City Cincinnati	State OH	Zip Code 45212-3410	Transaction ID : VN7CZA3Q100
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		515234.22	

Full Name (Last, First, Middle Initial) of Payee Tyler Harris		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2437 Robertson Ave		Amount 45.60	
City Cincinnati	State OH	Zip Code 45212-3410	Transaction ID : VN7CZA3Q2H7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		515234.22	

Full Name (Last, First, Middle Initial) of Payee Anthony Harrison		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3124 Sedgefield Gate Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-6103	Transaction ID : VN7CZA3PFC8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

(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 Anthony Harrison		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3124 Sedgefield Gate Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-6103	Transaction ID : VN7CZA3PH06
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Anthony Harrison		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3124 Sedgefield Gate Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-6103	Transaction ID : VN7CZA3PNS3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

Full Name (Last, First, Middle Initial) of Payee Anthony Harrison		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3124 Sedgefield Gate Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-6103	Transaction ID : VN7CZA3PQB6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Shenae Harrison		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 115 W 9th Ave		Amount 68.40	
City Homestead	State PA	Zip Code 15120-1085	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shenae Harrison		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 115 W 9th Ave		Amount 68.40	
City Homestead	State PA	Zip Code 15120-1085	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Michael Harry		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 336 E Elma Ave		Amount 89.16	
City Laurel Springs	State NJ	Zip Code 08021-2110	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Michael Harry		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 336 E Elma Ave		Amount 89.16	
City Laurel Springs	State NJ	Zip Code 08021-2110	Transaction ID : VN7CZA3NM79
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joshua Harvey		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7041 Laupher Ln		Amount 34.20	
City Hazelwood	State MO	Zip Code 63042-3000	Transaction ID : VN7CZA3Q618
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Joshua Harvey		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7041 Laupher Ln		Amount 34.20	
City Hazelwood	State MO	Zip Code 63042-3000	Transaction ID : VN7CZA3Q6W1
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 DeSota Haun		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7187 Creekberry Ct		Amount 68.40	
City Pickerington	State OH	Zip Code 43147-7885	Transaction ID : VN7CZA3QAR9
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee DeSota Haun		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7187 Creekberry Ct		Amount 68.40	
City Pickerington	State OH	Zip Code 43147-7885	Transaction ID : VN7CZA3QC29
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Hawkins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 607 Law St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-3427	Transaction ID : VN7CZA3PFT8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Samuel Hawkins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 607 Law St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-3427	Transaction ID : VN7CZA3PHE7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Samuel Hawkins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 607 Law St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-3427	Transaction ID : VN7CZA3PP72
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Samuel Hawkins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 607 Law St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-3427	Transaction ID : VN7CZA3PQS7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PRH6
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PRK2
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PRM0
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.27
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PRN8
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PRP6
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PRQ4
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.27
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PS13
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PS38
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PS46
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.27
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PS54
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PS62
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 11.09	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PS70
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.27
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 10.87	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PTH0
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 10.87	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PTK6
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 10.87	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PTM4
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.61
(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 Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 10.87	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PTN1
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 10.87	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PTP9
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 10.87	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PTQ7
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.61
(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 Hawthorn Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 10.87	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PV16
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 10.87	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PV32
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 10.87	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PV40
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.61
(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 Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 10.87	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PV58
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 10.87	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PV66
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hawthorn Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7623 Thorndike Rd		Amount 10.87	
City Greensboro	State NC	Zip Code 27409-9421	Transaction ID : VN7CZA3PV74
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.61
(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 Sallie Hayes-Williams		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1101 N Elm St Unit 505		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1315	Transaction ID : VN7CZA3PG61
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Sallie Hayes-Williams		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1101 N Elm St Unit 505		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1315	Transaction ID : VN7CZA3PHT2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Sallie Hayes-Williams		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1101 N Elm St Unit 505		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1315	Transaction ID : VN7CZA3PPJ9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(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 Sallie Hayes-Williams		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1101 N Elm St Unit 505		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1315	Transaction ID : VN7CZA3PR44
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lenekra Head		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 760 Aubert Ave		Amount 34.20	
City Saint Louis	State MO	Zip Code 63108-1647	Transaction ID : VN7CZA3Q5G6
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lenekra Head		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 760 Aubert Ave		Amount 34.20	
City Saint Louis	State MO	Zip Code 63108-1647	Transaction ID : VN7CZA3Q6B7
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 John Healy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 42.75	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PXF9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Healy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 42.75	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PZ07
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Healy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 42.75	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q0H2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	128.25
(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 John Healy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 42.75	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q229
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Hemingway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA3PF78
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Hemingway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA3PF86
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	88.35
(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 Jonathan Hemingway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA3PGV7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Hemingway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA3PGW5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Hemingway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA3PNM4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Jonathan Hemingway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA3PNN1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Hemingway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA3PQ67
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jonathan Hemingway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA3PQ74
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Terrell Herbert		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2440 76th Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19150-1808	Transaction ID : VN7CZA3NKS9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Terrell Herbert		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2440 76th Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19150-1808	Transaction ID : VN7CZA3NMY1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Paul Hess		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4947 Tholozan Ave		Amount 34.20	
City Saint Louis	State MO	Zip Code 63109-1736	Transaction ID : VN7CZA3Q5P3
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Paul Hess		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4947 Tholozan Ave		Amount 34.20	
City Saint Louis	State MO	Zip Code 63109-1736	Transaction ID : VN7CZA3Q6H4
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 James Hewitt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 33.04	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA3NVR9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 33.04	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA3NWP6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	100.28
(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 James Hewitt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 33.04	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA3NZG4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Hewitt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 33.04	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA3P0E9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Hewitt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 4.17	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA3P4P2
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	70.25
(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 James Hewitt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 4.17	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA3P550
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 4.17	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA3P6C8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee James Hewitt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 4.17	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA3P6S9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Sharlene Hicks		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 720 S Eureka Ave		Amount 72.96	
City Columbus	State OH	Zip Code 43204-2914	Transaction ID : VN7CZA3QBQ4
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sharlene Hicks		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 720 S Eureka Ave		Amount 72.96	
City Columbus	State OH	Zip Code 43204-2914	Transaction ID : VN7CZA3QD14
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brandon Holbrook		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4510 Shenandoah Ave Apt 1E		Amount 34.20	
City Saint Louis	State MO	Zip Code 63110-3458	Transaction ID : VN7CZA3Q5Y4
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	180.12
(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 Brandon Holbrook		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4510 Shenandoah Ave Apt 1E		Amount 34.20	
City Saint Louis	State MO	Zip Code 63110-3458	Transaction ID : VN7CZA3Q6S8
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Samuel Holden		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 9252 Big Bend Blvd		Amount 34.20	
City Webster Groves	State MO	Zip Code 63119-3921	Transaction ID : VN7CZA3Q6N5
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Samuel Holden		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 9252 Big Bend Blvd		Amount 34.20	
City Webster Groves	State MO	Zip Code 63119-3921	Transaction ID : VN7CZA3Q6G7
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Homewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5893 American Way		Amount 9.35	
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: Marco Rubio		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 : VN7CZA3NSJ8	

Full Name (Last, First, Middle Initial) of Payee Homewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5893 American Way		Amount 39.09	
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: Patrick Murphy		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 : VN7CZA3NSY3	

Full Name (Last, First, Middle Initial) of Payee Homewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5893 American Way		Amount 39.09	
City Orlando	State FL	Zip Code 32819-8201	
Purpose of Expenditure Lodging		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3NTA6	

(a) SUBTOTAL of Itemized Independent Expenditures.....	87.53
(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 Homewood Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5893 American Way		Amount 9.35	
City Orlando	State FL	Zip Code 32819-8201	Transaction ID : VN7CZA3NTP1
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Marcus Howell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 101 Roup Ave Apt 3		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15206-3437	Transaction ID : VN7CZA3PB61
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Marcus Howell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 101 Roup Ave Apt 3		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15206-3437	Transaction ID : VN7CZA3PCD9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	146.15
(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 Nathan Hubbell-Staeble		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2010 Corning Ave		Amount 79.34	
City Cleveland	State OH	Zip Code 44109-1721	Transaction ID : VN7CZA3P738
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathan Hubbell-Staeble		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2010 Corning Ave		Amount 79.34	
City Cleveland	State OH	Zip Code 44109-1721	Transaction ID : VN7CZA3P8J9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Justin Hullum		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1859 W 58th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44102-3252	Transaction ID : VN7CZA3P7C9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	227.08
(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 Justin Hullum		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1859 W 58th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44102-3252	Transaction ID : VN7CZA3P8V0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Charles Hunt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27514-7033	Transaction ID : VN7CZA3NV41
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Charles Hunt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27514-7033	Transaction ID : VN7CZA3NW28
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Charles Hunt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27514-7033	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NYW6

Full Name (Last, First, Middle Initial) of Payee Charles Hunt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 214 Conner Dr Apt 19		Amount 22.80	
City Chapel Hill	State NC	Zip Code 27514-7033	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NZT3

Full Name (Last, First, Middle Initial) of Payee Steven Hunter		Date of Public Distribution/Dissemination 09 / 20 / 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: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3PXS8

(a) SUBTOTAL of Itemized Independent Expenditures.....	84.08
(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 Steven Hunter		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PZA6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Steven Hunter		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q0V1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Steven Hunter		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q2C8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.44
(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 Taylor Hurst		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 701 S Chapman St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-2599	Transaction ID : VN7CZA3PFF1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Taylor Hurst		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 701 S Chapman St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-2599	Transaction ID : VN7CZA3PH30
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Taylor Hurst		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 701 S Chapman St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-2599	Transaction ID : VN7CZA3PNW7
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Taylor Hurst		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 701 S Chapman St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-2599	Transaction ID : VN7CZA3PQE0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PXQ3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PZ80
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Tonia Hutsell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tonia Hutsell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Muhammad Ibn Hayes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1842 E Allegheny Ave		Amount 89.16	
City Philadelphia	State PA	Zip Code 19134-3120	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Muhammad Ibn Hayes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1842 E Allegheny Ave		Amount 89.16	
City Philadelphia	State PA	Zip Code 19134-3120	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		178527.38	

Full Name (Last, First, Middle Initial) of Payee Kymberly Jacobs		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 280 W Johnstown Rd Apt D		Amount 99.07	
City Gahanna	State OH	Zip Code 43230-2762	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Full Name (Last, First, Middle Initial) of Payee Kymberly Jacobs		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 280 W Johnstown Rd Apt D		Amount 99.07	
City Gahanna	State OH	Zip Code 43230-2762	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		515234.22	

(a) SUBTOTAL of Itemized Independent Expenditures.....	287.30
(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 Ahmed-shakir Jama		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 341 King Edward Ct E		Amount 68.40	
City Columbus	State OH	Zip Code 43228-2414	Transaction ID : VN7CZA3QBT8
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ahmed-shakir Jama		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 341 King Edward Ct E		Amount 68.40	
City Columbus	State OH	Zip Code 43228-2414	Transaction ID : VN7CZA3QD47
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Annette James		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 32 E Lawson St Apt F		Amount 22.80	
City Durham	State NC	Zip Code 27701-4679	Transaction ID : VN7CZA3NVK0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Annette James		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 32 E Lawson St Apt F		Amount 22.80	
City Durham	State NC	Zip Code 27701-4679	Transaction ID : VN7CZA3NWH7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Annette James		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 32 E Lawson St Apt F		Amount 22.80	
City Durham	State NC	Zip Code 27701-4679	Transaction ID : VN7CZA3NZB5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Annette James		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 32 E Lawson St Apt F		Amount 22.80	
City Durham	State NC	Zip Code 27701-4679	Transaction ID : VN7CZA3P090
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Jack Jean-Baptiste		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA3NPE0
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jack Jean-Baptiste		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA3NRB0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jessie Jean-Baptiste		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 47.06	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA3NNY4
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: Marco Rubio		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.46
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Jessie Jean-Baptiste		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 47.06	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA3NQB7
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jessie Jean-Baptiste		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 47.06	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA3NQV4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jessie Jean-Baptiste		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2282 Greenwich Ave		Amount 47.06	
City Orlando	State FL	Zip Code 32817-4139	Transaction ID : VN7CZA3NS71
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Kaisey Jefferson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4242 Honey Bee Ct		Amount 68.40	
City Grove City	State OH	Zip Code 43123-8497	Transaction ID : VN7CZA3QB85
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kaisey Jefferson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4242 Honey Bee Ct		Amount 68.40	
City Grove City	State OH	Zip Code 43123-8497	Transaction ID : VN7CZA3QCJ5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Donald Johnson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2424 N 4th St		Amount 99.07	
City Columbus	State OH	Zip Code 43202-2707	Transaction ID : VN7CZA3QAS7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	235.87
(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 Donald Johnson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2424 N 4th St		Amount 99.07	
City Columbus	State OH	Zip Code 43202-2707	Transaction ID : VN7CZA3QC37
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Paris Johnson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address PO Box 201504		Amount 68.40	
City Shaker Hts	State OH	Zip Code 44120-8108	Transaction ID : VN7CZA3P7E5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Paris Johnson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address PO Box 201504		Amount 68.40	
City Shaker Hts	State OH	Zip Code 44120-8108	Transaction ID : VN7CZA3P8X6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	235.87
(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 Ronnell Johnson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 377 E Montcastle Dr Unit A		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-5366	Transaction ID : VN7CZA3PGK4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Ronnell Johnson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 377 E Montcastle Dr Unit A		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-5366	Transaction ID : VN7CZA3PJ67
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Ronnell Johnson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 377 E Montcastle Dr Unit A		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-5366	Transaction ID : VN7CZA3PPY3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(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 Ronnell Johnson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 377 E Montcastle Dr Unit A		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-5366	Transaction ID : VN7CZA3PRG8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA3PF11
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA3PGN9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Melissa Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA3PNE6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Melissa Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA3PQ09
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Alexander Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4714 A St Apt 2		Amount 21.38	
City Philadelphia	State PA	Zip Code 19120-4402	Transaction ID : VN7CZA3NKW3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	66.98
(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 Alexander Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4714 A St Apt 2		Amount 21.38	
City Philadelphia	State PA	Zip Code 19120-4402	Transaction ID : VN7CZA3NN15
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 178527.38			

Full Name (Last, First, Middle Initial) of Payee Cornelius Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3409 Oberlin Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-3711	Transaction ID : VN7CZA3PGF2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 73119.65			

Full Name (Last, First, Middle Initial) of Payee Cornelius Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3409 Oberlin Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-3711	Transaction ID : VN7CZA3PJ25
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 73119.65			

(a) SUBTOTAL of Itemized Independent Expenditures.....	66.98
(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 Cornelius Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3409 Oberlin Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-3711	Transaction ID : VN7CZA3PPT2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cornelius Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3409 Oberlin Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-3711	Transaction ID : VN7CZA3PRC7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Georgia Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3528 Maywood Ave		Amount 34.20	
City Saint Louis	State MO	Zip Code 63121-5108	Transaction ID : VN7CZA3Q5H4
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Georgia Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3528 Maywood Ave		Amount 34.20	
City Saint Louis	State MO	Zip Code 63121-5108	Transaction ID : VN7CZA3Q6C5
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: Jason Kander		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 5548.09			

Full Name (Last, First, Middle Initial) of Payee Gwendolyn Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2715 Patio Pl Apt 4		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-5553	Transaction ID : VN7CZA3PGE4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 73119.65			

Full Name (Last, First, Middle Initial) of Payee Gwendolyn Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2715 Patio Pl Apt 4		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-5553	Transaction ID : VN7CZA3PJ17
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 73119.65			

(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 Gwendolyn Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2715 Patio Pl Apt 4		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-5553	Transaction ID : VN7CZA3PPS4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gwendolyn Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2715 Patio Pl Apt 4		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-5553	Transaction ID : VN7CZA3PRB9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jarrett Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4951 Cote Brillante Ave		Amount 44.58	
City Saint Louis	State MO	Zip Code 63113-1712	Transaction ID : VN7CZA3Q5E0
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	90.18
(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 Jarrett Jones		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4951 Cote Brilliante Ave		Amount 44.58	
City Saint Louis	State MO	Zip Code 63113-1712	Transaction ID : VN7CZA3Q691
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Dominique Jordan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1754 Lee Rd		Amount 79.30	
City Cleveland	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA3P712
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dominique Jordan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1754 Lee Rd		Amount 79.30	
City Cleveland	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA3P8G4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	203.18
(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 Brendan Joyce		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1897 W 74th St Apt 6		Amount 79.30	
City Cleveland	State OH	Zip Code 44102-2982	Transaction ID : VN7CZA3P754
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brendan Joyce		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1897 W 74th St Apt 6		Amount 79.30	
City Cleveland	State OH	Zip Code 44102-2982	Transaction ID : VN7CZA3P8M5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Verlissia Joyner		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1406 Woodside Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-6755	Transaction ID : VN7CZA3PFE3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	181.40
(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 Verlissia Joyner		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1406 Woodside Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-6755	Transaction ID : VN7CZA3PH22
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Verlissia Joyner		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1406 Woodside Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-6755	Transaction ID : VN7CZA3PNV9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Verlissia Joyner		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1406 Woodside Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-6755	Transaction ID : VN7CZA3PQD2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Douglas Karel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7841 Fairwind Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43235-4525	Transaction ID : VN7CZA3QBA1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Full Name (Last, First, Middle Initial) of Payee Douglas Karel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7841 Fairwind Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43235-4525	Transaction ID : VN7CZA3QCM1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		515234.22	

Full Name (Last, First, Middle Initial) of Payee Robert Keegan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1989 W 58th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44102-3263	Transaction ID : VN7CZA3P7V8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

(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 Robert Keegan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1989 W 58th St		Amount 68.40	
City Cleveland	State OH	Zip Code 44102-3263	Transaction ID : VN7CZA3P9A9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lydia Kelly		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 18915 Detroit Ext Apt 601		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-3242	Transaction ID : VN7CZA3P7P8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lydia Kelly		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 18915 Detroit Ext Apt 601		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-3242	Transaction ID : VN7CZA3P959
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Taylor Kern		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 410 King Ave Apt B		Amount 38.48	
City Columbus	State OH	Zip Code 43201-2667	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3PWW9
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Taylor Kern		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 410 King Ave Apt B		Amount 38.48	
City Columbus	State OH	Zip Code 43201-2667	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3PYD6
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Taylor Kern		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 410 King Ave Apt B		Amount 38.48	
City Columbus	State OH	Zip Code 43201-2667	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3PZY2
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 515234.22		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.....	115.44
(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 Taylor Kern		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 410 King Ave Apt B		Amount 38.48	
City Columbus	State OH	Zip Code 43201-2667	Transaction ID : VN7CZA3Q1F9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kyle Kerr		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5020 Watauga Rd Apt H		Amount 22.80	
City Fayetteville	State NC	Zip Code 28304-6203	Transaction ID : VN7CZA3NVX9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kyle Kerr		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5020 Watauga Rd Apt H		Amount 22.80	
City Fayetteville	State NC	Zip Code 28304-6203	Transaction ID : VN7CZA3NWW6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	84.08
(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 Kyle Kerr		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5020 Watauga Rd Apt H		Amount 22.80	
City Fayetteville	State NC	Zip Code 28304-6203	Transaction ID : VN7CZA3NZN4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kyle Kerr		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5020 Watauga Rd Apt H		Amount 22.80	
City Fayetteville	State NC	Zip Code 28304-6203	Transaction ID : VN7CZA3P0K9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Adriane Kessler		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2205 Hedgerow Rd Unit H		Amount 68.40	
City Columbus	State OH	Zip Code 43220-6325	Transaction ID : VN7CZA3QBK2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Adriane Kessler		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2205 Hedgerow Rd Unit H		Amount 68.40	
City Columbus	State OH	Zip Code 43220-6325	Transaction ID : VN7CZA3QCX2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jason Kindell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Bermuda Dr		Amount 34.20	
City Normandy	State MO	Zip Code 63121-2425	Transaction ID : VN7CZA3Q5S5
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jason Kindell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1000 Bermuda Dr		Amount 34.20	
City Normandy	State MO	Zip Code 63121-2425	Transaction ID : VN7CZA3Q6M8
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Matthew King		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 52 Locust St		Amount 68.40	
City Etna	State PA	Zip Code 15223-2175	Transaction ID : VN7CZA3PB11
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		837667.61	

Full Name (Last, First, Middle Initial) of Payee Matthew King		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 52 Locust St		Amount 68.40	
City Etna	State PA	Zip Code 15223-2175	Transaction ID : VN7CZA3PC80
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		178527.38	

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA3NV83
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2016	
		73119.65	

(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 Thomas King		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA3NW60
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA3NZ08
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 22.80	
City Chicago	State IL	Zip Code 60649-3418	Transaction ID : VN7CZA3NZY5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.17	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA3P4V1
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		73119.65	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.17	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA3P592
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		73119.65	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.17	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA3P6G8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		837667.61	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Thomas King		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7323 S Phillips Ave		Amount 4.17	
City Chicago	State IL	Zip Code 60649-3418	
Purpose of Expenditure Per Diem		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3P6X1	

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 17.10	
City Raleigh	State NC	Zip Code 27609-7767	
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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3NCH2	

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 17.10	
City Raleigh	State NC	Zip Code 27609-7767	
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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3ND18	

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.37
(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 William King		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 17.10	
City Raleigh	State NC	Zip Code 27609-7767	Transaction ID : VN7CZA3NEH6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee William King		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 120 Calibre Chase Dr		Amount 17.10	
City Raleigh	State NC	Zip Code 27609-7767	Transaction ID : VN7CZA3NF12
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brandon Koebbe		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 815 16th St NW		Amount 7.50	
City Washington	State DC	Zip Code 20006-4101	Transaction ID : VN7CZA3PVJ1
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.70
(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 Brandon Koebbe		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 815 16th St NW		Amount 7.50	
City Washington	State DC	Zip Code 20006-4101	Transaction ID : VN7CZA3PVS6
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brandon Koebbe		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 815 16th St NW		Amount 7.35	
City Washington	State DC	Zip Code 20006-4101	Transaction ID : VN7CZA3PWE9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brandon Koebbe		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 815 16th St NW		Amount 7.35	
City Washington	State DC	Zip Code 20006-4101	Transaction ID : VN7CZA3PWN4
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	22.20
(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 Kristofer Kotlarik		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1126 Bryden Rd		Amount 68.40	
City Columbus	State OH	Zip Code 43205-1822	Transaction ID : VN7CZA3QA4
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kristofer Kotlarik		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1126 Bryden Rd		Amount 68.40	
City Columbus	State OH	Zip Code 43205-1822	Transaction ID : VN7CZA3QC94
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nery Lam		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3845 Goose Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32822-7715	Transaction ID : VN7CZA3NP33
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: Marco Rubio		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		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 Nery Lam		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3845 Goose Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32822-7715	Transaction ID : VN7CZA3NQE1
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: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		23693.00	

Full Name (Last, First, Middle Initial) of Payee Nery Lam		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3845 Goose Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32822-7715	Transaction ID : VN7CZA3NQZ5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

Full Name (Last, First, Middle Initial) of Payee Nery Lam		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3845 Goose Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32822-7715	Transaction ID : VN7CZA3NSA5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Manuel Lampon		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2313 N Park Ave Apt 1		Amount 89.16	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA3NKK3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Manuel Lampon		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2313 N Park Ave Apt 1		Amount 89.16	
City Philadelphia	State PA	Zip Code 19132-4512	Transaction ID : VN7CZA3NMR4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Robyn Lanice		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PY95
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(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 Robyn Lanice		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PZT0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Robyn Lanice		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q1B7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Robyn Lanice		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q2W2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Wilburt Laurore		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5228 Cinderlane Pkwy		Amount 34.20	
City Orlando	State FL	Zip Code 32808-1024	Transaction ID : VN7CZA3NPB7
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Wilburt Laurore		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5228 Cinderlane Pkwy		Amount 34.20	
City Orlando	State FL	Zip Code 32808-1024	Transaction ID : VN7CZA3NR79
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jacob Lawrence		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 920 Reiss St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-1559	Transaction ID : VN7CZA3PBA3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Jacob Lawrence		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 920 Reiss St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-1559	Transaction ID : VN7CZA3PCH1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee David Lebel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5972 Paint Creek Way		Amount 68.40	
City Hilliard	State OH	Zip Code 43026-7735	Transaction ID : VN7CZA3QAY6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee David Lebel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5972 Paint Creek Way		Amount 68.40	
City Hilliard	State OH	Zip Code 43026-7735	Transaction ID : VN7CZA3QC86
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Eun Lee		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1107 Wineberry Ct		Amount 34.20	
City Ocoee	State FL	Zip Code 34761-3417	Transaction ID : VN7CZA3NPJ2
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: Marco Rubio		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eun Lee		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1107 Wineberry Ct		Amount 34.20	
City Ocoee	State FL	Zip Code 34761-3417	Transaction ID : VN7CZA3NQH5
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eun Lee		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1107 Wineberry Ct		Amount 34.20	
City Ocoee	State FL	Zip Code 34761-3417	Transaction ID : VN7CZA3NRF2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Eun Lee		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1107 Wineberry Ct		Amount 34.20	
City Ocoee	State FL	Zip Code 34761-3417	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3NSD9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Damir Lewis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1979 Plymouth St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2721	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3NK87
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Damir Lewis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1979 Plymouth St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-2721	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3NMC9
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Johnny Lewis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1202 Marlowe Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-2628	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3P704
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Johnny Lewis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1202 Marlowe Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-2628	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3P8F6
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Joshua Lewis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 79.25	
City Cleveland	State OH	Zip Code 44115-2615	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3P720
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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.....	216.05
(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 Joshua Lewis		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3311 Prospect Ave E		Amount 79.25	
City Cleveland	State OH	Zip Code 44115-2615	Transaction ID : VN7CZA3P8H1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Manuel Limia		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 238 Sierra Way		Amount 10.69	
City Davenport	State FL	Zip Code 33837-7628	Transaction ID : VN7CZA3NQ76
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Manuel Limia		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 238 Sierra Way		Amount 10.69	
City Davenport	State FL	Zip Code 33837-7628	Transaction ID : VN7CZA3NS22
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	100.63
(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 Dontell Lindsey		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3132 Sorento St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-2460	Transaction ID : VN7CZA3PBW5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dontell Lindsey		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3132 Sorento St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-2460	Transaction ID : VN7CZA3PD31
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Todd Littlejohn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 306 Lea St Apt 3		Amount 68.40	
City Munhall	State PA	Zip Code 15120-2797	Transaction ID : VN7CZA3PBQ5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Todd Littlejohn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 306 Lea St Apt 3		Amount 68.40	
City Munhall	State PA	Zip Code 15120-2797	Transaction ID : VN7CZA3PCY1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sarah Lomprez		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address PO Box 2963		Amount 34.20	
City Sanford	State FL	Zip Code 32772-2963	Transaction ID : VN7CZA3NPZ3
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sarah Lomprez		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address PO Box 2963		Amount 34.20	
City Sanford	State FL	Zip Code 32772-2963	Transaction ID : VN7CZA3NRV7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Amir Longhorne		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA3PF52
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Amir Longhorne		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA3PGS1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Amir Longhorne		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA3PNJ8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(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 Amir Longhorne		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 830 W Market St		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-1857	Transaction ID : VN7CZA3PQ41
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Special Lovincey		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 423 Probasco St		Amount 38.60	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA3PY37
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Special Lovincey		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 423 Probasco St		Amount 38.60	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA3PZM3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	100.00
(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 Special Lovincey		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 423 Probasco St		Amount 38.60	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA3Q150
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Special Lovincey		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 423 Probasco St		Amount 38.60	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA3Q2P5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Alexander MacMillan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 710 Morehead Ave Apt 5		Amount 25.73	
City Greensboro	State NC	Zip Code 27401-2363	Transaction ID : VN7CZA3FPF7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.93
(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 Alexander MacMillan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 710 Morehead Ave Apt 5		Amount 25.73	
City Greensboro	State NC	Zip Code 27401-2363	Transaction ID : VN7CZA3PHA5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Alexander MacMillan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 710 Morehead Ave Apt 5		Amount 25.73	
City Greensboro	State NC	Zip Code 27401-2363	Transaction ID : VN7CZA3PP32
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Alexander MacMillan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 710 Morehead Ave Apt 5		Amount 25.73	
City Greensboro	State NC	Zip Code 27401-2363	Transaction ID : VN7CZA3PQN5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Paul Maes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 17.10	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA3NCN4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 17.10	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA3ND50
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 17.10	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA3NEN7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Paul Maes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 17.10	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA3NF54
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 3.13	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA3NHQ9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 3.13	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA3NHY5
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Paul Maes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 3.13	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA3NJG7
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Paul Maes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1931 SW 14th Ave Apt 1		Amount 3.13	
City Portland	State OR	Zip Code 97201-2586	Transaction ID : VN7CZA3NJP4
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tanda Makupson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1428 Golden Gate Blvd		Amount 68.40	
City Mayfield Hts	State OH	Zip Code 44124-6832	Transaction ID : VN7CZA3P7J7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Tanda Makupson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1428 Golden Gate Blvd		Amount 68.40	
City Mayfield Hts	State OH	Zip Code 44124-6832	Transaction ID : VN7CZA3P918
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Daniel Marasco		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5233 Stanton Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15201-2592	Transaction ID : VN7CZA3PBF2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Daniel Marasco		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5233 Stanton Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15201-2592	Transaction ID : VN7CZA3PCP0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Tyreek Marsh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 127 E Kennedy Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15214-2731	Transaction ID : VN7CZA3PC06
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: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

Full Name (Last, First, Middle Initial) of Payee Tyreek Marsh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 127 E Kennedy Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15214-2731	Transaction ID : VN7CZA3PD72
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		178527.38	

Full Name (Last, First, Middle Initial) of Payee Johnny Maxwell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2307 Kersey St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-3901	Transaction ID : VN7CZA3PGH8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

(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 Johnny Maxwell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2307 Kersey St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-3901	Transaction ID : VN7CZA3PJ41
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Johnny Maxwell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2307 Kersey St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-3901	Transaction ID : VN7CZA3PPW8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Johnny Maxwell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2307 Kersey St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-3901	Transaction ID : VN7CZA3PRE3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Talvin Mays		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 22.80	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA3PGB0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 73119.65			

Full Name (Last, First, Middle Initial) of Payee Talvin Mays		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 22.80	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA3PHY3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 73119.65			

Full Name (Last, First, Middle Initial) of Payee Talvin Mays		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 22.80	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA3PPP0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 837667.61			

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Talvin Mays		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 22.80	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA3PR85
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Talvin Mays		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 4.17	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA3PVH3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Talvin Mays		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 4.17	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA3PVR8
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Talvin Mays		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 4.08	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA3PWD1
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Talvin Mays		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2331 Michigan Ave Apt A		Amount 4.08	
City Saint Louis	State MO	Zip Code 63104-1709	Transaction ID : VN7CZA3PWM6
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hope McCain		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1389 E 171st St		Amount 68.40	
City Cleveland	State OH	Zip Code 44110-2525	Transaction ID : VN7CZA3P788
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.56
(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 Hope McCain		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1389 E 171st St		Amount 68.40	
City Cleveland	State OH	Zip Code 44110-2525	Transaction ID : VN7CZA3P8Q9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marnetta McCain		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 252 E 244th St Apt 206		Amount 68.40	
City Euclid	State OH	Zip Code 44123-1463	Transaction ID : VN7CZA3P7M2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marnetta McCain		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 252 E 244th St Apt 206		Amount 68.40	
City Euclid	State OH	Zip Code 44123-1463	Transaction ID : VN7CZA3P934
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Jaclyn McCann		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address PO Box 4896		Amount 4.17	
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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jaclyn McCann		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address PO Box 4896		Amount 4.17	
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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jaclyn McCann		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address PO Box 4896		Amount 4.17	
City Pittsburgh	State PA	Zip Code 15206-0896	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Jaclyn McCann		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address PO Box 4896		Amount 4.17	
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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3P6T7

Full Name (Last, First, Middle Initial) of Payee Jamar McCarthy		Date of Public Distribution/Dissemination 09 / 20 / 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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NCS5

Full Name (Last, First, Middle Initial) of Payee Jamar McCarthy		Date of Public Distribution/Dissemination 09 / 20 / 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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3ND92

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.37
(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 Jamar McCarthy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 544 Knightsbridge way		Amount 17.10	
City Raleigh	State NC	Zip Code 27604	Transaction ID : VN7CZA3NES9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jamar McCarthy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 544 Knightsbridge way		Amount 17.10	
City Raleigh	State NC	Zip Code 27604	Transaction ID : VN7CZA3NF95
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Destiny McCray		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4012 McIntosh St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2288	Transaction ID : VN7CZA3PG95
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Destiny McCray		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 4012 McIntosh St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2288	Transaction ID : VN7CZA3PHW8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Destiny McCray		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 4012 McIntosh St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2288	Transaction ID : VN7CZA3PPM4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Destiny McCray		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 4012 McIntosh St		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-2288	Transaction ID : VN7CZA3PR69
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Razzah McDade		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4532 Commander Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-3666	Transaction ID : VN7CZA3NP00
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Razzah McDade		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4532 Commander Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32822-3666	Transaction ID : VN7CZA3NQX0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jason McDaniel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 658 SE 148th Ave		Amount 12.50	
City Portland	State OR	Zip Code 97233-2588	Transaction ID : VN7CZA3NNK7
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Jason McDaniel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 658 SE 148th Ave		Amount 12.50	
City Portland	State OR	Zip Code 97233-2588	Transaction ID : VN7CZA3NNN3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Richard McDonald		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1365 Marlboro Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15221-2677	Transaction ID : VN7CZA3PB04
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Richard McDonald		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1365 Marlboro Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15221-2677	Transaction ID : VN7CZA3PC72
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Stephanie McDonald		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1312 W Florida St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3320	Transaction ID : VN7CZA3PF94
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Stephanie McDonald		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1312 W Florida St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3320	Transaction ID : VN7CZA3PGX3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Stephanie McDonald		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1312 W Florida St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3320	Transaction ID : VN7CZA3PNP9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Stephanie McDonald		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1312 W Florida St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3320	Transaction ID : VN7CZA3PQ82
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Taylor McDonald		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 25 Bobbitt St		Amount 17.10	
City Wendell	State NC	Zip Code 27591-9431	Transaction ID : VN7CZA3NCT3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Taylor McDonald		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 25 Bobbitt St		Amount 17.10	
City Wendell	State NC	Zip Code 27591-9431	Transaction ID : VN7CZA3NDA0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <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 Taylor McDonald		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 25 Bobbitt St		Amount 17.10	
City Wendell	State NC	Zip Code 27591-9431	Transaction ID : VN7CZA3NET7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 McDonald		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 25 Bobbitt St		Amount 17.10	
City Wendell	State NC	Zip Code 27591-9431	Transaction ID : VN7CZA3NFA3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Waylon McDonald		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1517 Ofallon St Apt A		Amount 34.20	
City Saint Louis	State MO	Zip Code 63106-3370	Transaction ID : VN7CZA3Q5T3
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Waylon McDonald		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1517 Ofallon St Apt A		Amount 34.20	
City Saint Louis	State MO	Zip Code 63106-3370	Transaction ID : VN7CZA3Q6N6
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA3PF44
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA3PGR3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA3PNH0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Trench McElrath		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2600 Pennoak Way		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-4087	Transaction ID : VN7CZA3PQ33
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Linsey McGlocklin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12530 Lake Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1574	Transaction ID : VN7CZA3P807
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Linsey McGlocklin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12530 Lake Ave		Amount 68.40	
City Lakewood	State OH	Zip Code 44107-1574	Transaction ID : VN7CZA3P9F8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 McMillan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5907 Lawndale St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1209	Transaction ID : VN7CZA3NKA2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 McMillan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5907 Lawndale St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1209	Transaction ID : VN7CZA3NME5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Anastasia Mebane		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2516 Grimsley St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3134	Transaction ID : VN7CZA3PG37
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Anastasia Mebane		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2516 Grimsley St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3134	Transaction ID : VN7CZA3PHQ8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Anastasia Mebane		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2516 Grimsley St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3134	Transaction ID : VN7CZA3PPF5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Anastasia Mebane		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2516 Grimsley St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3134	Transaction ID : VN7CZA3PR10
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee La'Steven Medlin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1605 Midway St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-2734	Transaction ID : VN7CZA3PG29
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee La'Steven Medlin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1605 Midway St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-2734	Transaction ID : VN7CZA3PHP0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 La'Steven Medlin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1605 Midway St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-2734	Transaction ID : VN7CZA3PPE7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee La'Steven Medlin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1605 Midway St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-2734	Transaction ID : VN7CZA3PR02
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Catherine Medlock-Walton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1311 Shepherd St		Amount 38.00	
City Durham	State NC	Zip Code 27707-1646	Transaction ID : VN7CZA3PFQ4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	83.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Catherine Medlock-Walton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1311 Shepherd St		Amount 38.00	
City Durham	State NC	Zip Code 27707-1646	Transaction ID : VN7CZA3PHB3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Catherine Medlock-Walton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1311 Shepherd St		Amount 38.00	
City Durham	State NC	Zip Code 27707-1646	Transaction ID : VN7CZA3PP48
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Catherine Medlock-Walton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1311 Shepherd St		Amount 38.00	
City Durham	State NC	Zip Code 27707-1646	Transaction ID : VN7CZA3PQP3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Tierra Mercado		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6104 S. Luflin		Amount 4.17	
City Chicago	State IL	Zip Code 60636-2332	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA3P4H2
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		73119.65	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Tierra Mercado		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6104 S. Luflin		Amount 4.17	
City Chicago	State IL	Zip Code 60636-2332	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA3P4Z3
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		73119.65	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Tierra Mercado		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6104 S. Luflin		Amount 4.17	
City Chicago	State IL	Zip Code 60636-2332	
Purpose of Expenditure Per Diem		Category/Type	Transaction ID : VN7CZA3P679
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		837667.61	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.51
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Tierra Mercado		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6104 S. Luffin		Amount 4.17	
City Chicago	State IL	Zip Code 60636-2332	Transaction ID : VN7CZA3P6M0
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Reginald Merchant		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 956 12th St SW Apt 215		Amount 17.10	
City Forest Lake	State MN	Zip Code 55025-3710	Transaction ID : VN7CZA3NCR7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Reginald Merchant		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 956 12th St SW Apt 215		Amount 17.10	
City Forest Lake	State MN	Zip Code 55025-3710	Transaction ID : VN7CZA3ND84
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.37
(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 Reginald Merchant		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 956 12th St SW Apt 215		Amount 17.10	
City Forest Lake	State MN	Zip Code 55025-3710	Transaction ID : VN7CZA3NER1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Reginald Merchant		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 956 12th St SW Apt 215		Amount 17.10	
City Forest Lake	State MN	Zip Code 55025-3710	Transaction ID : VN7CZA3NF87
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Reginald Merchant		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 956 12th St SW Apt 215		Amount 3.13	
City Forest Lake	State MN	Zip Code 55025-3710	Transaction ID : VN7CZA3NHT3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Reginald Merchant		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 956 12th St SW Apt 215		Amount 3.13	
City Forest Lake	State MN	Zip Code 55025-3710	Transaction ID : VN7CZA3NJ01
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Full Name (Last, First, Middle Initial) of Payee Reginald Merchant		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 956 12th St SW Apt 215		Amount 3.13	
City Forest Lake	State MN	Zip Code 55025-3710	Transaction ID : VN7CZA3NJJ3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Full Name (Last, First, Middle Initial) of Payee Reginald Merchant		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 956 12th St SW Apt 215		Amount 3.13	
City Forest Lake	State MN	Zip Code 55025-3710	Transaction ID : VN7CZA3NJR0
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

(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 Love Metellus		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2045 W Tioga St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19140-3917	Transaction ID : VN7CZA3NKP7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Love Metellus		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2045 W Tioga St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19140-3917	Transaction ID : VN7CZA3NMV7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Day Metivier		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10949 Oberlin Rd		Amount 68.40	
City Oberlin	State OH	Zip Code 44074-9771	Transaction ID : VN7CZA3P7S2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Day Metvier		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 10949 Oberlin Rd		Amount 68.40	
City Oberlin	State OH	Zip Code 44074-9771	Transaction ID : VN7CZA3P983
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Diana Metobob		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2335 N Carlisle St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4515	Transaction ID : VN7CZA3NJV4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Diana Metobob		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2335 N Carlisle St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19132-4515	Transaction ID : VN7CZA3NKZ6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Jazzmine Miles		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PY20
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jazzmine Miles		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PK5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jazzmine Miles		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q142
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Jazzmine Miles		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q2N7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Milton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 701 Bob Baxter Dr		Amount 22.80	
City Elon	State NC	Zip Code 27244-7960	Transaction ID : VN7CZA3PFV6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Milton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 701 Bob Baxter Dr		Amount 22.80	
City Elon	State NC	Zip Code 27244-7960	Transaction ID : VN7CZA3PHF5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Elizabeth Milton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 701 Bob Baxter Dr		Amount 22.80	
City Elon	State NC	Zip Code 27244-7960	Transaction ID : VN7CZA3PP80
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Milton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 701 Bob Baxter Dr		Amount 22.80	
City Elon	State NC	Zip Code 27244-7960	Transaction ID : VN7CZA3PQT5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mission Control, Inc.		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 624 Hebron Ave Ste 200		Amount 12192.50	
City Glastonbury	State CT	Zip Code 06033-5006	Transaction ID : VN7CZA3PE26
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12238.10
(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 Mission Control, Inc.		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 624 Hebron Ave Ste 200		Amount 12192.50	
City Glastonbury	State CT	Zip Code 06033-5006	Transaction ID : VN7CZA3PE34
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Keith Mitchell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1709 Lady Fern Trl		Amount 34.20	
City Deland	State FL	Zip Code 32720-3533	Transaction ID : VN7CZA3NPY5
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Keith Mitchell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1709 Lady Fern Trl		Amount 34.20	
City Deland	State FL	Zip Code 32720-3533	Transaction ID : VN7CZA3NRT9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12260.90
(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 Sandra Moore		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2623 Oakdale Ave		Amount 68.40	
City Lorain	State OH	Zip Code 44055-1061	Transaction ID : VN7CZA3P7F3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sandra Moore		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2623 Oakdale Ave		Amount 68.40	
City Lorain	State OH	Zip Code 44055-1061	Transaction ID : VN7CZA3P8Y4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Deja Moore Goodwin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45238-3434	Transaction ID : VN7CZA3PWZ3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Deja Moore Goodwin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45238-3434	Transaction ID : VN7CZA3PYG0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Deja Moore Goodwin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45238-3434	Transaction ID : VN7CZA3Q015
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Deja Moore Goodwin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2446 Boudinot Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45238-3434	Transaction ID : VN7CZA3Q1J2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Elizabeth Moorefield		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 513 N Cedar St		Amount 33.02	
City Greensboro	State NC	Zip Code 27401-1947	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3PFB0
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		73119.65	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 Elizabeth Moorefield		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 513 N Cedar St		Amount 33.02	
City Greensboro	State NC	Zip Code 27401-1947	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3PGZ8
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		73119.65	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 Elizabeth Moorefield		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 513 N Cedar St		Amount 33.02	
City Greensboro	State NC	Zip Code 27401-1947	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3PNR5
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		837667.61	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.....	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 Elizabeth Moorefield		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 513 N Cedar St		Amount 33.02	
City Greensboro	State NC	Zip Code 27401-1947	Transaction ID : VN7CZA3PQA8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Deraymus Morales		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1583 Mccoy Road		Amount 34.20	
City Orlando	State FL	Zip Code 32809	Transaction ID : VN7CZA3NQ34
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Deraymus Morales		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1583 Mccoy Road		Amount 34.20	
City Orlando	State FL	Zip Code 32809	Transaction ID : VN7CZA3NRZ8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	101.42
(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 Stacey Morgan		Date of Public Distribution/Dissemination 09 / 20 / 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: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Stacey Morgan		Date of Public Distribution/Dissemination 09 / 20 / 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: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Stacey Morgan		Date of Public Distribution/Dissemination 09 / 20 / 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: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.44
(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 Stacey Morgan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q294
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Slade Morgan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5665 Hornaday Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27409-3166	Transaction ID : VN7CZA3PG04
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Slade Morgan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5665 Hornaday Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27409-3166	Transaction ID : VN7CZA3PHM4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	84.08
(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 Slade Morgan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5665 Hornaday Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27409-3166	Transaction ID : VN7CZA3PPC1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Slade Morgan		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5665 Hornaday Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27409-3166	Transaction ID : VN7CZA3PQY6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cheyenne Morole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1944 Crestview Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28304-5247	Transaction ID : VN7CZA3NVT5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Cheyenne Morole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1944 Crestview Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28304-5247	Transaction ID : VN7CZA3NWR2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cheyenne Morole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1944 Crestview Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28304-5247	Transaction ID : VN7CZA3NZJ0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cheyenne Morole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1944 Crestview Dr		Amount 22.80	
City Fayetteville	State NC	Zip Code 28304-5247	Transaction ID : VN7CZA3P0G5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Tina Morton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2424 S Holden Rd Apt J		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5740	Transaction ID : VN7CZA3PGD6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tina Morton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2424 S Holden Rd Apt J		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5740	Transaction ID : VN7CZA3PJ09
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tina Morton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2424 S Holden Rd Apt J		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5740	Transaction ID : VN7CZA3PPR6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Tina Morton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2424 S Holden Rd Apt J		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5740	Transaction ID : VN7CZA3PRA1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	Transaction ID : VN7CZA3PVQ0
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.17	
City Seattle	State WA	Zip Code 98144-5757	Transaction ID : VN7CZA3PVY5
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Patrick Mouton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.08	
City Seattle	State WA	Zip Code 98144-5757	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3PWK8

Full Name (Last, First, Middle Initial) of Payee Patrick Mouton		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1509 S Winthrop St		Amount 4.08	
City Seattle	State WA	Zip Code 98144-5757	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3PWT4

Full Name (Last, First, Middle Initial) of Payee Malik Muhammad		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 560 W 7th Ave		Amount 68.40	
City West Homestead	State PA	Zip Code 15120-1053	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3PBT9

(a) SUBTOTAL of Itemized Independent Expenditures.....	76.56
(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 Malik Muhammad		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 560 W 7th Ave		Amount 68.40	
City West Homestead	State PA	Zip Code 15120-1053	Transaction ID : VN7CZA3PD15
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee James Murray		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 99.07	
City Pittsburgh	State PA	Zip Code 15238-1420	Transaction ID : VN7CZA3PBD6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee James Murray		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 17 Hancock Camp Rd		Amount 99.07	
City Pittsburgh	State PA	Zip Code 15238-1420	Transaction ID : VN7CZA3PCM4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	266.54
(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 Allen Myers		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2516 Grimsley St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3134	Transaction ID : VN7CZA3PFW2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Allen Myers		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2516 Grimsley St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3134	Transaction ID : VN7CZA3PHG3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Allen Myers		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2516 Grimsley St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3134	Transaction ID : VN7CZA3PP97
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Allen Myers		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2516 Grimsley St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3134	Transaction ID : VN7CZA3PQV2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Julie Nappi		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PY53
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Julie Nappi		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PZP8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	99.76
(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 Julie Nappi		Date of Public Distribution/Dissemination 09 / 20 / 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: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Julie Nappi		Date of Public Distribution/Dissemination 09 / 20 / 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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Damien Navarro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 31 E Armat St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-2201	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <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 Damien Navarro		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 31 E Armat St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-2201	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee North Side Valero		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 820 Pennsylvania Ave		Amount 14.48	
City Pittsburgh	State PA	Zip Code 15233-1407	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee North Side Valero		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 820 Pennsylvania Ave		Amount 14.48	
City Pittsburgh	State PA	Zip Code 15233-1407	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	97.36
(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 Steven Nourse		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4708 Cadmus Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43228-8404	Transaction ID : VN7CZA3QB10
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Steven Nourse		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4708 Cadmus Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43228-8404	Transaction ID : VN7CZA3QCB0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eladio Olivo Martinez		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6942 Keystone St Apt 2A		Amount 68.40	
City Philadelphia	State PA	Zip Code 19135-2040	Transaction ID : VN7CZA3NK79
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Eladio Olivo Martinez		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6942 Keystone St Apt 2A		Amount 68.40	
City Philadelphia	State PA	Zip Code 19135-2040	Transaction ID : VN7CZA3NMB1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shawn Olszewski		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 131 Harcourt Dr		Amount 68.40	
City Akron	State OH	Zip Code 44313-6508	Transaction ID : VN7CZA3P7H9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shawn Olszewski		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 131 Harcourt Dr		Amount 68.40	
City Akron	State OH	Zip Code 44313-6508	Transaction ID : VN7CZA3P900
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Omega World Travel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 114.65	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA3Q8X3
Name of Federal Candidate Supported or Opposed by Expenditure: Roy Blunt		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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 109.90	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA3Q8Y1
Name of Federal Candidate Supported or Opposed by Expenditure: Roy Blunt		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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 112.00	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA3Q8Z9
Name of Federal Candidate Supported or Opposed by Expenditure: Roy Blunt		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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	336.55
(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 Omega World Travel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 112.00	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA3Q907
Purpose of Expenditure Travel	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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Omega World Travel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 112.00	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA3Q914
Purpose of Expenditure Travel	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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Omega World Travel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 114.65	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA3Q9B3
Purpose of Expenditure Travel	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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	338.65
(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 Omega World Travel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 109.90	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA3Q9C1
Name of Federal Candidate Supported or Opposed by Expenditure: Jason Kander		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: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 112.00	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA3Q9D9
Name of Federal Candidate Supported or Opposed by Expenditure: Jason Kander		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: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Omega World Travel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 112.00	
City Virginia Beach	State VA	Zip Code 23462-5631	
Purpose of Expenditure Travel		Category/ Type	Transaction ID : VN7CZA3Q9E7
Name of Federal Candidate Supported or Opposed by Expenditure: Jason Kander		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: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	333.90
(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 Omega World Travel		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5602 Virginia Beach Blvd		Amount 112.00	
City Virginia Beach	State VA	Zip Code 23462-5631	Transaction ID : VN7CZA3Q9F5
Purpose of Expenditure Travel	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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Lesche Owens		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12001 Towa Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44108	Transaction ID : VN7CZA3P7Q6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lesche Owens		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12001 Towa Ave		Amount 68.40	
City Cleveland	State OH	Zip Code 44108	Transaction ID : VN7CZA3P967
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	248.80
(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 Richard Palmer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 710 Armandale St		Amount 99.07	
City Pittsburgh	State PA	Zip Code 15212-4078	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3PAY8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Richard Palmer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 710 Armandale St		Amount 99.07	
City Pittsburgh	State PA	Zip Code 15212-4078	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3PC56
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Jasmyn Parham		Date of Public Distribution/Dissemination 09 / 20 / 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 : VN7CZA3PXE2
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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.....	232.34
(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 Jasmyn Parham		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PYZ9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jasmyn Parham		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q0G4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jasmyn Parham		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q211
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Javier Pazos		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2531 Collins St		Amount 21.38	
City Philadelphia	State PA	Zip Code 19125-1723	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Javier Pazos		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2531 Collins St		Amount 21.38	
City Philadelphia	State PA	Zip Code 19125-1723	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Peerless Printing		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2250 Gilbert Ave		Amount 192.50	
City Cincinnati	State OH	Zip Code 45206-2531	
Purpose of Expenditure Printing		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	235.26
(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 Peerless Printing		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2250 Gilbert Ave		Amount 192.50	
City Cincinnati	State OH	Zip Code 45206-2531	Transaction ID : VN7CZA3Q541
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: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Peerless Printing		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2250 Gilbert Ave		Amount 192.50	
City Cincinnati	State OH	Zip Code 45206-2531	Transaction ID : VN7CZA3Q559
Purpose of Expenditure Printing	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Peerless Printing		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2250 Gilbert Ave		Amount 192.50	
City Cincinnati	State OH	Zip Code 45206-2531	Transaction ID : VN7CZA3Q567
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	577.50
(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 Alexander Perkins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1461 Felton St		Amount 34.20	
City Deltona	State FL	Zip Code 32725-5936	Transaction ID : VN7CZA3NPP4
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Alexander Perkins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1461 Felton St		Amount 34.20	
City Deltona	State FL	Zip Code 32725-5936	Transaction ID : VN7CZA3NRJ6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee William Peterman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 874 Garlow Blvd		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15239-1112	Transaction ID : VN7CZA3PBM2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 William Peterman		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 874 Garlow Blvd		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15239-1112	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jared Peters		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7402 Blanding Dr		Amount 34.20	
City Saint Louis	State MO	Zip Code 63135-3446	
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Jared Peters		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7402 Blanding Dr		Amount 34.20	
City Saint Louis	State MO	Zip Code 63135-3446	
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Russell Phillips		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1550 Superior Ave E # 301		Amount 68.40	
City Cleveland	State OH	Zip Code 44114-2906	Transaction ID : VN7CZA3P898
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Phillips		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1550 Superior Ave E # 301		Amount 68.40	
City Cleveland	State OH	Zip Code 44114-2906	Transaction ID : VN7CZA3P9R8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cristian Picado		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2003 Cedar Fork Dr Apt F		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-3500	Transaction ID : VN7CZA3PFH7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Cristian Picado		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2003 Cedar Fork Dr Apt F		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-3500	Transaction ID : VN7CZA3PH56
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Cristian Picado		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2003 Cedar Fork Dr Apt F		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-3500	Transaction ID : VN7CZA3PNY3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

Full Name (Last, First, Middle Initial) of Payee Cristian Picado		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2003 Cedar Fork Dr Apt F		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-3500	Transaction ID : VN7CZA3PQG6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(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 Philip Piridy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PXA0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Philip Piridy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PYV7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Philip Piridy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q0C2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.44
(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 Philip Pirdy		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q1X9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Andrew Podlaski		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2449 Berkshire Ct		Amount 34.20	
City Kissimmee	State FL	Zip Code 34746-5423	Transaction ID : VN7CZA3NQ26
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Andrew Podlaski		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2449 Berkshire Ct		Amount 34.20	
City Kissimmee	State FL	Zip Code 34746-5423	Transaction ID : VN7CZA3NRY0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	106.88
(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 Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 24.77	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA3NCM6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 24.77	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA3ND42
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 24.77	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA3NEM9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 24.77	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA3NF46
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 3.13	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA3NHP2
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 3.13	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA3NHX7
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 3.13	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA3NJF9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nathaniel Pond		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 13116 SE Powell Blvd		Amount 3.13	
City Portland	State OR	Zip Code 97236-3342	Transaction ID : VN7CZA3NJN6
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Latasha Powers		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2117 N Hastings St		Amount 34.20	
City Orlando	State FL	Zip Code 32808-4810	Transaction ID : VN7CZA3NP83
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: Marco Rubio		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		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 Latasha Powers		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2117 N Hastings St		Amount 34.20	
City Orlando	State FL	Zip Code 32808-4810	Transaction ID : VN7CZA3NQF9
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: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		23693.00	

Full Name (Last, First, Middle Initial) of Payee Latasha Powers		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2117 N Hastings St		Amount 34.20	
City Orlando	State FL	Zip Code 32808-4810	Transaction ID : VN7CZA3NR45
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

Full Name (Last, First, Middle Initial) of Payee Latasha Powers		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2117 N Hastings St		Amount 34.20	
City Orlando	State FL	Zip Code 32808-4810	Transaction ID : VN7CZA3NSB3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Wisdom Presley		Date of Public Distribution/Dissemination 09 / 20 / 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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3NJZ5

Full Name (Last, First, Middle Initial) of Payee Wisdom Presley		Date of Public Distribution/Dissemination 09 / 20 / 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: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		178527.38	

Transaction ID : VN7CZA3NM38

Full Name (Last, First, Middle Initial) of Payee Bajja Pritchard		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 841 Chislett St Apt 1		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15206-1301	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3BPB7

(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 Bajia Pritchard		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 841 Chislett St Apt 1		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15206-1301	Transaction ID : VN7CZA3PCX3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jacob Pritchard		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1514 W Royalton Rd Apt 1		Amount 68.40	
City Broadview Heights	State OH	Zip Code 44147-2444	Transaction ID : VN7CZA3P795
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jacob Pritchard		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1514 W Royalton Rd Apt 1		Amount 68.40	
City Broadview Heights	State OH	Zip Code 44147-2444	Transaction ID : VN7CZA3P8R7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Brian Pruitt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PY79
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brian Pruitt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PZR4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Brian Pruitt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q191
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Brian Pruitt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q2T6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Donna Putnam		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1021 Bellows Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43223-1517	Transaction ID : VN7CZA3QB02
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Donna Putnam		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1021 Bellows Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43223-1517	Transaction ID : VN7CZA3QCA2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Kevin Quarles		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA3PFA2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Quarles		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA3PGY1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kevin Quarles		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA3PNQ7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Kevin Quarles		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3937 Hahns Ln Apt D		Amount 22.80	
City Greensboro	State NC	Zip Code 27401-4572	Transaction ID : VN7CZA3PQ90
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Joshua Quesada		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5424 Montague St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1417	Transaction ID : VN7CZA3NKH8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Joshua Quesada		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5424 Montague St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19124-1417	Transaction ID : VN7CZA3NMP8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Vanessa Quick-Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1026 Clinard Ave		Amount 22.80	
City High Point	State NC	Zip Code 27265-3142	Transaction ID : VN7CZA3PG11
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Vanessa Quick-Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1026 Clinard Ave		Amount 22.80	
City High Point	State NC	Zip Code 27265-3142	Transaction ID : VN7CZA3PHN2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Vanessa Quick-Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1026 Clinard Ave		Amount 22.80	
City High Point	State NC	Zip Code 27265-3142	Transaction ID : VN7CZA3PPD9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Vanessa Quick-Cole		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1026 Clinard Ave		Amount 22.80	
City High Point	State NC	Zip Code 27265-3142	Transaction ID : VN7CZA3PQZ4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement 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 09 / 20 / 2016	
Mailing Address 11525 Dorsett Rd		Amount 12.70	
City Maryland Heights	State MO	Zip Code 63043-3444	Transaction ID : VN7CZA3Q8S3
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 QuickTrip		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 11525 Dorsett Rd		Amount 12.70	
City Maryland Heights	State MO	Zip Code 63043-3444	Transaction ID : VN7CZA3Q972
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	48.20
(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 Kenneth Quinn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3111 Briar Ridge Rd		Amount 68.40	
City Columbus	State OH	Zip Code 43232-5690	Transaction ID : VN7CZA3QBS0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kenneth Quinn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3111 Briar Ridge Rd		Amount 68.40	
City Columbus	State OH	Zip Code 43232-5690	Transaction ID : VN7CZA3QD39
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee David Rachal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PX84
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	175.28
(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 David Rachal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PYS1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee David Rachal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q0A6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee David Rachal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q1V3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.44
(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 Sadiqa Rahn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 16104 Scottsdale Blvd		Amount 68.40	
City Cleveland	State OH	Zip Code 44120-5037	Transaction ID : VN7CZA3P7Z9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Full Name (Last, First, Middle Initial) of Payee Sadiqa Rahn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 16104 Scottsdale Blvd		Amount 68.40	
City Cleveland	State OH	Zip Code 44120-5037	Transaction ID : VN7CZA3P9E1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		515234.22	

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 423 Probasco St		Amount 49.56	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA3PWV1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

(a) SUBTOTAL of Itemized Independent Expenditures.....	186.36
(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 Frederick Randall II		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 423 Probasco St		Amount 49.56	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA3PYC9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 423 Probasco St		Amount 49.56	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA3PZX4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Frederick Randall II		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 423 Probasco St		Amount 49.56	
City Cincinnati	State OH	Zip Code 45220-3204	Transaction ID : VN7CZA3Q1E1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	148.68
(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 Cindy Reed		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 23116 39th Ave E		Amount 1.49	
City Spanaway	State WA	Zip Code 98387-6964	
Purpose of Expenditure Per Diem		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: Marco Rubio		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NTZ2

Full Name (Last, First, Middle Initial) of Payee Cindy Reed		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 23116 39th Ave E		Amount 6.25	
City Spanaway	State WA	Zip Code 98387-6964	
Purpose of Expenditure Per Diem		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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NV00

Full Name (Last, First, Middle Initial) of Payee Cindy Reed		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 23116 39th Ave E		Amount 6.25	
City Spanaway	State WA	Zip Code 98387-6964	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NV18

(a) SUBTOTAL of Itemized Independent Expenditures.....	13.99
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Cindy Reed		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 23116 39th Ave E		Amount 1.49	
City Spanaway	State WA	Zip Code 98387-6964	Transaction ID : VN7CZA3NV26
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Letitia Reed		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2117 Ruark Ct Apt 101		Amount 17.10	
City Raleigh	State NC	Zip Code 27608-1869	Transaction ID : VN7CZA3NCX7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Letitia Reed		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2117 Ruark Ct Apt 101		Amount 17.10	
City Raleigh	State NC	Zip Code 27608-1869	Transaction ID : VN7CZA3NDD3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.69
(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 Letitia Reed		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2117 Ruark Ct Apt 101		Amount 17.10	
City Raleigh	State NC	Zip Code 27608-1869	Transaction ID : VN7CZA3NEX0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Letitia Reed		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2117 Ruark Ct Apt 101		Amount 17.10	
City Raleigh	State NC	Zip Code 27608-1869	Transaction ID : VN7CZA3NFD7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tameka Reeves		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2176 Haviland Dr Apt 7		Amount 68.40	
City Columbus	State OH	Zip Code 43207-2217	Transaction ID : VN7CZA3QB52
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Tameka Reeves		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2176 Haviland Dr Apt 7		Amount 68.40	
City Columbus	State OH	Zip Code 43207-2217	Transaction ID : VN7CZA3QCF1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Craig Rembert		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3513 Wells St		Amount 34.20	
City Orlando	State FL	Zip Code 32805-4286	Transaction ID : VN7CZA3NPG6
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Craig Rembert		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3513 Wells St		Amount 34.20	
City Orlando	State FL	Zip Code 32805-4286	Transaction ID : VN7CZA3NRD6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Jasua Render		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7701 Camden Ave		Amount 79.34	
City Cleveland	State OH	Zip Code 44102-5024	Transaction ID : VN7CZA3P746
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jasua Render		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7701 Camden Ave		Amount 79.34	
City Cleveland	State OH	Zip Code 44102-5024	Transaction ID : VN7CZA3P8K7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tarah Reppert		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 740 E Vernon Rd Apt 310		Amount 89.16	
City Philadelphia	State PA	Zip Code 19119-1508	Transaction ID : VN7CZA3NJS8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	247.84
(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 Tarah Reppert		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 740 E Vernon Rd Apt 310		Amount 89.16	
City Philadelphia	State PA	Zip Code 19119-1508	Transaction ID : VN7CZA3NKX0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		178527.38	

Full Name (Last, First, Middle Initial) of Payee Chardo Richardson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3011 S Semoran Blvd		Amount 38.60	
City Orlando	State FL	Zip Code 32822-2667	Transaction ID : VN7CZA3NNX6
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: Patrick Murphy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		23693.00	

Full Name (Last, First, Middle Initial) of Payee Chardo Richardson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3011 S Semoran Blvd		Amount 38.60	
City Orlando	State FL	Zip Code 32822-2667	Transaction ID : VN7CZA3NQT6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(a) SUBTOTAL of Itemized Independent Expenditures.....	166.36
(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 Iris Rivera		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7350 Westpointe Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32835-6192	
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: Marco Rubio		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NNZ2

Full Name (Last, First, Middle Initial) of Payee Iris Rivera		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7350 Westpointe Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32835-6192	
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NQZ5

Full Name (Last, First, Middle Initial) of Payee Iris Rivera		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7350 Westpointe Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32835-6192	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NQW2

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Iris Rivera		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 7350 Westpointe Blvd		Amount 34.20	
City Orlando	State FL	Zip Code 32835-6192	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NS89

Full Name (Last, First, Middle Initial) of Payee Donrell Roberts		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2508 Logandale Dr		Amount 10.69	
City Orlando	State FL	Zip Code 32817-4714	
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NQ68

Full Name (Last, First, Middle Initial) of Payee Donrell Roberts		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2508 Logandale Dr		Amount 10.69	
City Orlando	State FL	Zip Code 32817-4714	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NS14

(a) SUBTOTAL of Itemized Independent Expenditures.....	55.58
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Marceia Robinson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 62 N 17th St		Amount 68.40	
City Columbus	State OH	Zip Code 43203-1801	Transaction ID : VN7CZA3QB4
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Marceia Robinson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 62 N 17th St		Amount 68.40	
City Columbus	State OH	Zip Code 43203-1801	Transaction ID : VN7CZA3QCE4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA3NVG6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Antonio Rodgers		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA3NWE3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 73119.65			

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA3NZ81
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 837667.61			

Full Name (Last, First, Middle Initial) of Payee Antonio Rodgers		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 703 Liberty St		Amount 22.80	
City Durham	State NC	Zip Code 27701-3864	Transaction ID : VN7CZA3P068
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 837667.61			

(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 Robin Romeo		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 114 E Walnut Ln		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-2005	Transaction ID : VN7CZA3NJT6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Robin Romeo		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 114 E Walnut Ln		Amount 68.40	
City Philadelphia	State PA	Zip Code 19144-2005	Transaction ID : VN7CZA3NKY8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jeanette Rose		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5590 Gary Ave		Amount 68.40	
City Bedford	State OH	Zip Code 44146-2453	Transaction ID : VN7CZA3P849
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Jeanette Rose		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5590 Gary Ave		Amount 68.40	
City Bedford	State OH	Zip Code 44146-2453	Transaction ID : VN7CZA3P9K0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elijuan Ross		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3554 Farmington Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5884	Transaction ID : VN7CZA3PF03
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elijuan Ross		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3554 Farmington Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5884	Transaction ID : VN7CZA3PGM2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Elijuan Ross		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3554 Farmington Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5884	Transaction ID : VN7CZA3PND8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Elijuan Ross		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3554 Farmington Dr		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-5884	Transaction ID : VN7CZA3PPZ1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Forest Ruge-Whitacre		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15221-3510	Transaction ID : VN7CZA3PB37
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Forest Ruge-Whitacre		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 524 Jeanette St Apt 2		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15221-3510	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PCA5

Full Name (Last, First, Middle Initial) of Payee Luzmeilyn Ruiz		Date of Public Distribution/Dissemination 09 / 20 / 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: Marco Rubio		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NNR7

Full Name (Last, First, Middle Initial) of Payee Luzmeilyn Ruiz		Date of Public Distribution/Dissemination 09 / 20 / 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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3NQ84

(a) SUBTOTAL of Itemized Independent Expenditures.....	162.52
(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 Luzmeilyn Ruiz		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 451 S Semoran Blvd Apt 101		Amount 47.06	
City Orlando	State FL	Zip Code 32807-4301	Transaction ID : VN7CZA3NQM9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Luzmeilyn Ruiz		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 451 S Semoran Blvd Apt 101		Amount 47.06	
City Orlando	State FL	Zip Code 32807-4301	Transaction ID : VN7CZA3NS30
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Leila Russell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1409 Flora Lee Dr		Amount 34.20	
City Leesburg	State FL	Zip Code 34748-3464	Transaction ID : VN7CZA3NP18
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: Marco Rubio		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	128.32
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Leila Russell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1409 Flora Lee Dr		Amount 34.20	
City Leesburg	State FL	Zip Code 34748-3464	Transaction ID : VN7CZA3NQD3
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Leila Russell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1409 Flora Lee Dr		Amount 34.20	
City Leesburg	State FL	Zip Code 34748-3464	Transaction ID : VN7CZA3NQY8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Leila Russell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1409 Flora Lee Dr		Amount 34.20	
City Leesburg	State FL	Zip Code 34748-3464	Transaction ID : VN7CZA3NS97
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Camper Ruybal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12616 NE 79th St		Amount 33.02	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA3NVH4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12616 NE 79th St		Amount 33.02	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA3NWF1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12616 NE 79th St		Amount 33.02	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA3NZ99
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <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 Camper Ruybal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12616 NE 79th St		Amount 33.02	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA3P076
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12616 NE 79th St		Amount 4.17	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA3P4N4
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12616 NE 79th St		Amount 4.17	
City Vancouver	State WA	Zip Code 98682-4005	Transaction ID : VN7CZA3P542
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.36
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12616 NE 79th St		Amount 4.17	
City Vancouver	State WA	Zip Code 98682-4005	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Camper Ruybal		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12616 NE 79th St		Amount 4.17	
City Vancouver	State WA	Zip Code 98682-4005	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Yawo Sadji		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6658 Seahurst Dr		Amount 68.40	
City Canal Winchester	State OH	Zip Code 43110-9017	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Yawo Sadij		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6658 Seahurst Dr		Amount 68.40	
City Canal Winchester	State OH	Zip Code 43110-9017	Transaction ID : VN7CZA3QCR3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address Whisperwood Dr		Amount 17.10	
City Raleigh	State NC	Zip Code 27616	Transaction ID : VN7CZA3NCJ0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address Whisperwood Dr		Amount 17.10	
City Raleigh	State NC	Zip Code 27616	Transaction ID : VN7CZA3ND26
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Nick Santos		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address Whisperwood Dr		Amount 17.10	
City Raleigh	State NC	Zip Code 27616	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3NEJ4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Nick Santos		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address Whisperwood Dr		Amount 17.10	
City Raleigh	State NC	Zip Code 27616	
Purpose of Expenditure Salary and Benefits		Category/Type	Transaction ID : VN7CZA3NF20
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Shaakira Sargent		Date of Public Distribution/Dissemination 09 / 20 / 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	Transaction ID : VN7CZA3PX35
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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.....	72.68
(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 Shaakira Sargent		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PYM2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shaakira Sargent		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q057
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shaakira Sargent		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 38.48	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q1P4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.44
(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 Pedro Sarsama		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4507 W 20th St		Amount 55.86	
City Cleveland	State OH	Zip Code 44109-4443	Transaction ID : VN7CZA3P865
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Pedro Sarsama		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4507 W 20th St		Amount 55.86	
City Cleveland	State OH	Zip Code 44109-4443	Transaction ID : VN7CZA3P9N4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee ZhaiRon Scales		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2308 Argyle Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43219-1404	Transaction ID : VN7CZA3QB77
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	180.12
(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 ZhaiRon Scales		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2308 Argyle Dr		Amount 68.40	
City Columbus	State OH	Zip Code 43219-1404	Transaction ID : VN7CZA3QCH7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 48.45	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PXX0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 48.45	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PZE7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	165.30
(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 Elizabeth Schenker		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 48.45	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q0Z2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Elizabeth Schenker		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 48.45	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q2G9
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Serrin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1730 Gurtler Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32804-6427	Transaction ID : VN7CZA3NP75
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	131.10
(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 Michael Serrin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1730 Gurtler Ct		Amount 34.20	
City Orlando	State FL	Zip Code 32804-6427	Transaction ID : VN7CZA3NR37
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Andrea Shafer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2941 Schaller Rd		Amount 38.60	
City Bethel	State OH	Zip Code 45106-9446	Transaction ID : VN7CZA3PY45
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Andrea Shafer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2941 Schaller Rd		Amount 38.60	
City Bethel	State OH	Zip Code 45106-9446	Transaction ID : VN7CZA3PZNO
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	111.40
(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 Andrea Shafer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2941 Schaller Rd		Amount 38.60	
City Bethel	State OH	Zip Code 45106-9446	Transaction ID : VN7CZA3Q168
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Andrea Shafer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2941 Schaller Rd		Amount 38.60	
City Bethel	State OH	Zip Code 45106-9446	Transaction ID : VN7CZA3Q2Q3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sahro Sharif		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2156 Margo Rd		Amount 68.40	
City Columbus	State OH	Zip Code 43229-5768	Transaction ID : VN7CZA3QB4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Sahro Sharif		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2156 Margo Rd		Amount 68.40	
City Columbus	State OH	Zip Code 43229-5768	Transaction ID : VN7CZA3QCW4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement 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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 6.71	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA3Q395
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement 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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.07	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA3Q3A3
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	84.18
(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 Shell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.00	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 6.04	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.00	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	24.04
(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 Shell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 6.71	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA3Q3S1
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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement 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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.07	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA3Q3T9
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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement 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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.00	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA3Q3V7
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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	24.78
(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 Shell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 6.04	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA3Q3W5
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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement 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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.00	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA3Q3X3
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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement 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		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 6.71	
City Cincinnati	State OH	Zip Code 45220-2016	Transaction ID : VN7CZA3Q498
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: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.75
(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 Shell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.07	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q4A6

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.00	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q4B3

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 6.04	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q4C1

(a) SUBTOTAL of Itemized Independent Expenditures.....	24.11
(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 Shell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.00	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q4D9

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 6.71	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q4S4

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.07	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q4T2

(a) SUBTOTAL of Itemized Independent Expenditures.....	24.78
(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 Shell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.00	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q4V0

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 6.04	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q4W8

Full Name (Last, First, Middle Initial) of Payee Shell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3337 Clifton Ave		Amount 9.00	
City Cincinnati	State OH	Zip Code 45220-2016	
Purpose of Expenditure Gas		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q4X6

(a) SUBTOTAL of Itemized Independent Expenditures.....	24.04
(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 Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 2.12	
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: Marco Rubio		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 : VN7CZA3NSF5	

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 2.20	
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: Marco Rubio		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 : VN7CZA3NSG3	

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 2.39	
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: Marco Rubio		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 : VN7CZA3NSH0	

(a) SUBTOTAL of Itemized Independent Expenditures.....	6.71
(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 Shell Express		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 8.88	
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: Patrick Murphy		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 : VN7CZA3NSV9	

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 9.19	
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: Patrick Murphy		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 : VN7CZA3NSW7	

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 10.00	
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: Patrick Murphy		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 : VN7CZA3NSX5	

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.07
(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 Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 8.88	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NT72

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 9.19	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NT80

Full Name (Last, First, Middle Initial) of Payee Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 10.00	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NT98

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.07
(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 Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 2.12	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA3NTK7
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 2.20	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA3NTM5
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Shell Express		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 2380 W. Oak Ridge Rd		Amount 2.39	
City Orlando	State FL	Zip Code 32809-3716	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA3NTN3
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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.....	6.71
(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 Gianna Simmons		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 99.07	
City New Florence	State PA	Zip Code 15944-8402	Transaction ID : VN7CZA3PB45
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gianna Simmons		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 293 Clay Pike Rd		Amount 99.07	
City New Florence	State PA	Zip Code 15944-8402	Transaction ID : VN7CZA3PCB3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Sims		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PXR1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	232.34
(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 Jordan Sims		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PZ98
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Sims		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q0T3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Sims		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q2B0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PX43
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PYN0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Otha Smiley		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q065
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Otha Smiley		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q1Q2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jarmont Smith		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4411 Rehobeth Church Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-9245	Transaction ID : VN7CZA3PGC8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jarmont Smith		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4411 Rehobeth Church Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-9245	Transaction ID : VN7CZA3PHZ1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79.80
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Jarmont Smith		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4411 Rehobeth Church Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-9245	Transaction ID : VN7CZA3PPQ8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jarmont Smith		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4411 Rehobeth Church Rd		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-9245	Transaction ID : VN7CZA3PR93
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marshall Smith		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 703 Umstead Ln		Amount 17.10	
City Garner	State NC	Zip Code 27529-3025	Transaction ID : VN7CZA3NCY5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Marshall Smith		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 703 Umstead Ln		Amount 17.10	
City Garner	State NC	Zip Code 27529-3025	Transaction ID : VN7CZA3NDE1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		73119.65	

Full Name (Last, First, Middle Initial) of Payee Marshall Smith		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 703 Umstead Ln		Amount 17.10	
City Garner	State NC	Zip Code 27529-3025	Transaction ID : VN7CZA3NEY8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

Full Name (Last, First, Middle Initial) of Payee Marshall Smith		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 703 Umstead Ln		Amount 17.10	
City Garner	State NC	Zip Code 27529-3025	Transaction ID : VN7CZA3NFE5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(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 Theodore Smith		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PXC6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PYX3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q0E8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Theodore Smith		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q1Z5
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lisa Sosa		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3663 Cook Ave Apt B		Amount 27.93	
City Saint Louis	State MO	Zip Code 63113-3801	Transaction ID : VN7CZA3Q5A8
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lisa Sosa		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3663 Cook Ave Apt B		Amount 27.93	
City Saint Louis	State MO	Zip Code 63113-3801	Transaction ID : VN7CZA3Q668
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	90.06
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Mister Sparks		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1091 E 21st Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43211-2409	Transaction ID : VN7CZA3QBF1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mister Sparks		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1091 E 21st Ave		Amount 68.40	
City Columbus	State OH	Zip Code 43211-2409	Transaction ID : VN7CZA3QCS0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1626 W 5th Ave		Amount 7.95	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA3QDC1
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	144.75
(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 Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 1626 W 5th Ave		Amount 11.49	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA3QDD8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 1626 W 5th Ave		Amount 15.75	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA3QDE6
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 1626 W 5th Ave		Amount 7.00	
City Columbus	State OH	Zip Code 43212-2311	
Purpose of Expenditure Gas		Category/ Type	Transaction ID : VN7CZA3QDF4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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.....▶	34.24
(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 Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 1626 W 5th Ave		Amount 7.00	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3QDG2

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 1626 W 5th Ave		Amount 18.10	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3QDH0

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 1626 W 5th Ave		Amount 16.50	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Transaction ID : VN7CZA3QDJ8

(a) SUBTOTAL of Itemized Independent Expenditures.....	41.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 09 / 20 / 2016	
Mailing Address 1626 W 5th Ave		Amount 7.95	
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3QDT1	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 1626 W 5th Ave		Amount 11.49	
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3QDV9	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 1626 W 5th Ave		Amount 15.75	
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3QDW7	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.19
(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 Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 1626 W 5th Ave		Amount 7.00	
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3QDX5	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 1626 W 5th Ave		Amount 7.00	
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3QDY3	

Full Name (Last, First, Middle Initial) of Payee Speedway		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 1626 W 5th Ave		Amount 18.10	
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA3QDZ1	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.10
(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 Speedway		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1626 W 5th Ave		Amount 16.50	
City Columbus	State OH	Zip Code 43212-2311	Transaction ID : VN7CZA3QE09
Purpose of Expenditure Gas	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marcus Spencer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7241 Ogontz Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-1303	Transaction ID : VN7CZA3NK61
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Marcus Spencer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7241 Ogontz Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19138-1303	Transaction ID : VN7CZA3NMA3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	153.30
(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 Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Transaction ID : VN7CZA3P0X8

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Transaction ID : VN7CZA3P119

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Transaction ID : VN7CZA3P127

(a) SUBTOTAL of Itemized Independent Expenditures.....	44.55
(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 Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3P135

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3P143

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
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: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3P151

(a) SUBTOTAL of Itemized Independent Expenditures.....	44.55
(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 Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA3P193
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <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 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA3P1H6
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <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 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA3P1N7
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	44.55
(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 Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA3P1P5
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA3P1Q3
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZA3P1R1
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 73119.65		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.....	44.55
(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 Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
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: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

(a) SUBTOTAL of Itemized Independent Expenditures.....	44.55
(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 Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3P3H9

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3P3J7

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3P3M3

(a) SUBTOTAL of Itemized Independent Expenditures.....	44.55
(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 Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA3P3N1
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		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 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA3P3P9
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		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 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA3P3T1
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	44.55
(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 Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA3P424
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <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 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA3P465
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <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 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	Transaction ID : VN7CZA3P473
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	44.55
(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 Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	
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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	
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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	
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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	44.55
(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 Staybridge Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 1012 Airport Blvd		Amount 14.85	
City Morrisville	State NC	Zip Code 27560-9195	
Transaction ID : VN7CZA3P4E9			
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kristy Steele		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 1404 Larchmont Rd		Amount 68.40	
City Cleveland	State OH	Zip Code 44110-2814	
Transaction ID : VN7CZA3P7R4			
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kristy Steele		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 1404 Larchmont Rd		Amount 68.40	
City Cleveland	State OH	Zip Code 44110-2814	
Transaction ID : VN7CZA3P975			
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	151.65
(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 Anthony Stewart		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6400 Lee Rd S		Amount 55.86	
City Cleveland	State OH	Zip Code 44137-4541	Transaction ID : VN7CZA3P857
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Anthony Stewart		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 6400 Lee Rd S		Amount 55.86	
City Cleveland	State OH	Zip Code 44137-4541	Transaction ID : VN7CZA3P9M6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tanesia Stokes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1567 Lovett St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3340	Transaction ID : VN7CZA3PFX0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	134.52
(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 Tanesia Stokes		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1567 Lovett St		Amount 22.80	
City Greensboro	State NC	Zip Code 27403-3340	Transaction ID : VN7CZA3PHH1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Stroud		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3301 N OHenry Blvd Apt A		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-3859	Transaction ID : VN7CZA3PG45
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michael Stroud		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3301 N OHenry Blvd Apt A		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-3859	Transaction ID : VN7CZA3PHR6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Michael Stroud		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3301 N OHenry Blvd Apt A		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-3859	Transaction ID : VN7CZA3PPG3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Michael Stroud		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3301 N OHenry Blvd Apt A		Amount 22.80	
City Greensboro	State NC	Zip Code 27405-3859	Transaction ID : VN7CZA3PR28
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Katie Suggs		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1962 Spring St		Amount 47.06	
City Winter Park	State FL	Zip Code 32792-1721	Transaction ID : VN7CZA3NPN6
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	92.66
(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 Katie Suggs		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1962 Spring St		Amount 47.06	
City Winter Park	State FL	Zip Code 32792-1721	Transaction ID : VN7CZA3NRH8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 4071 Beechwood Blvd		Amount 15.01	
City Pittsburgh	State PA	Zip Code 15217-2669	Transaction ID : VN7CZA3PDC2
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 4071 Beechwood Blvd		Amount 15.92	
City Pittsburgh	State PA	Zip Code 15217-2669	Transaction ID : VN7CZA3PDD0
Purpose of Expenditure Gas	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	77.99
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward 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 09 / 20 / 2016	
Mailing Address 4071 Beechwood Blvd		Amount 15.01	
City Pittsburgh	State PA	Zip Code 15217-2669	Transaction ID : VN7CZA3PDR7
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: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sunoco		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4071 Beechwood Blvd		Amount 15.92	
City Pittsburgh	State PA	Zip Code 15217-2669	Transaction ID : VN7CZA3PDS5
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: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee John Sweeney		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2528 Jay Ave # C		Amount 68.40	
City Cleveland	State OH	Zip Code 44113-3072	Transaction ID : VN7CZA3P7A3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	99.33
(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 John Sweeney		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2528 Jay Ave # C		Amount 68.40	
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: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3P8S5

Full Name (Last, First, Middle Initial) of Payee Marcel Tarris		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2405 N Broadway		Amount 34.20	
City Saint Louis	State MO	Zip Code 63102-1503	
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q5X6

Full Name (Last, First, Middle Initial) of Payee Marcel Tarris		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2405 N Broadway		Amount 34.20	
City Saint Louis	State MO	Zip Code 63102-1503	
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3Q6R0

(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 Rob Taylor		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3250 Rider Trl S		Amount 6.25	
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3QAD2

Full Name (Last, First, Middle Initial) of Payee Rob Taylor		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3250 Rider Trl S		Amount 6.25	
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3QAF8

Full Name (Last, First, Middle Initial) of Payee Michael Telian		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15224-1776	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PB79

(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 Michael Telian		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 223 S Atlantic Ave Apt 1		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15224-1776	Transaction ID : VN7CZA3PCE7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Helena Thesing		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 109 Keith Ct		Amount 34.20	
City Winter Springs	State FL	Zip Code 32708-2479	Transaction ID : VN7CZA3NPV3
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Helena Thesing		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 109 Keith Ct		Amount 34.20	
City Winter Springs	State FL	Zip Code 32708-2479	Transaction ID : VN7CZA3NRQ5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Dereck Thomas		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1114 Rebecca Ave		Amount 77.25	
City Braddock	State PA	Zip Code 15104-2672	Transaction ID : VN7CZA3PBX3
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Dereck Thomas		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1114 Rebecca Ave		Amount 77.25	
City Braddock	State PA	Zip Code 15104-2672	Transaction ID : VN7CZA3PD49
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA3PJ40
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	158.67
(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 Karleton Thomas		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA3P501
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA3P687
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Karleton Thomas		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1701 Sterling Rd		Amount 4.17	
City Park Forest	State IL	Zip Code 60466	Transaction ID : VN7CZA3P6N7
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Rodney Thomas		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 302 W Nedro Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1833	Transaction ID : VN7CZA3NK94
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rodney Thomas		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 302 W Nedro Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19120-1833	Transaction ID : VN7CZA3NMD7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jarrett Thompson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2352 Woodcrest Dr		Amount 47.06	
City Winter Park	State FL	Zip Code 32792-5421	Transaction ID : VN7CZA3NPA9
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	183.86
(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 Jarrett Thompson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2352 Woodcrest Dr		Amount 47.06	
City Winter Park	State FL	Zip Code 32792-5421	Transaction ID : VN7CZA3NR61
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Linda Thompson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 8235 Clarcona Ocoee Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32818-1271	Transaction ID : VN7CZA3NQ18
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Linda Thompson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 8235 Clarcona Ocoee Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32818-1271	Transaction ID : VN7CZA3NRX2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.46
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PX50
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PYP8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Morgan Tobin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q073
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Morgan Tobin		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q1R0
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3250 Rider Trl S		Amount 25.65	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA3NCG4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3250 Rider Trl S		Amount 25.65	
City Earth City	State MO	Zip Code 63045-1527	Transaction ID : VN7CZA3ND01
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 20 / 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 : VN7CZA3NEG8
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 20 / 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 : VN7CZA3NF04
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 20 / 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	Transaction ID : VN7CZA3NHN4
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 73119.65		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.....	54.43
(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 Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 20 / 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	Transaction ID : VN7CZA3NHW9
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought 73119.65		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 20 / 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	Transaction ID : VN7CZA3NJE1
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Thomas Torkelson		Date of Public Distribution/Dissemination 09 / 20 / 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	Transaction ID : VN7CZA3NJM9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Ali Totten		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2091 Creekview Ct Apt C		Amount 68.40	
City Reynoldsburg	State OH	Zip Code 43068-4253	Transaction ID : VN7CZA3QB28
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ali Totten		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2091 Creekview Ct Apt C		Amount 68.40	
City Reynoldsburg	State OH	Zip Code 43068-4253	Transaction ID : VN7CZA3QCC8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3PX68
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Antoine Trammell		Date of Public Distribution/Dissemination 09 / 20 / 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: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3PYQ5

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3Q081

Full Name (Last, First, Middle Initial) of Payee Antoine Trammell		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3Q1S8

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Courtney Troup		Date of Public Distribution/Dissemination 09 / 20 / 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	Transaction ID : VN7CZA3PB29
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Courtney Troup		Date of Public Distribution/Dissemination 09 / 20 / 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	Transaction ID : VN7CZA3PC97
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Christina Tull		Date of Public Distribution/Dissemination 09 / 20 / 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	Transaction ID : VN7CZA3PB95
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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.....	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 Christina Tull		Date of Public Distribution/Dissemination 09 / 20 / 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: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PCG3

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PXM9

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : VN7CZA3PZ56

(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 Keshawn Turner		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q0P1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Keshawn Turner		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3219 Jefferson Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45220-2216	Transaction ID : VN7CZA3Q278
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Keith Turner		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1754 Lee Rd		Amount 68.40	
City Cleveland Hts	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA3P7D7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Keith Turner		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1754 Lee Rd		Amount 68.40	
City Cleveland Hts	State OH	Zip Code 44118-1736	Transaction ID : VN7CZA3P8W8
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nashay Turner		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7244 San Diego Ave		Amount 34.20	
City Saint Louis	State MO	Zip Code 63121-2340	Transaction ID : VN7CZA3Q5W9
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Nashay Turner		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 7244 San Diego Ave		Amount 34.20	
City Saint Louis	State MO	Zip Code 63121-2340	Transaction ID : VN7CZA3Q6Q2
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		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 Shuntell Ulmer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA3PXK1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shuntell Ulmer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA3PZ48
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shuntell Ulmer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA3Q0N3
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Shuntell Ulmer		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1219 Purcell Ave		Amount 34.20	
City Cincinnati	State OH	Zip Code 45205-1317	Transaction ID : VN7CZA3Q260
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jesse Umoette		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2436 Winding Hills Ct		Amount 68.40	
City Columbus	State OH	Zip Code 43224-3018	Transaction ID : VN7CZA3QBH6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jesse Umoette		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2436 Winding Hills Ct		Amount 68.40	
City Columbus	State OH	Zip Code 43224-3018	Transaction ID : VN7CZA3QCV6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		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 Brandon Ushry		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5120 Hawaiian Ter Apt 5		Amount 38.48	
City Cincinnati	State OH	Zip Code 45223-1167	Transaction ID : VN7CZA3PXZ6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brandon Ushry		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5120 Hawaiian Ter Apt 5		Amount 38.48	
City Cincinnati	State OH	Zip Code 45223-1167	Transaction ID : VN7CZA3PZG1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Brandon Ushry		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5120 Hawaiian Ter Apt 5		Amount 38.48	
City Cincinnati	State OH	Zip Code 45223-1167	Transaction ID : VN7CZA3Q118
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.44
(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 Brandon Ushry		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5120 Hawaiian Ter Apt 5		Amount 38.48	
City Cincinnati	State OH	Zip Code 45223-1167	Transaction ID : VN7CZA3Q2J5
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 22.80	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA3NVA9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 22.80	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA3NW86
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	84.08
(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 Eric Vaughn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 22.80	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA3NZ24
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 22.80	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA3P001
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.17	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA3P4K8
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.77
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.17	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA3P519
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		73119.65	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.17	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA3P695
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Full Name (Last, First, Middle Initial) of Payee Eric Vaughn		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1432 S Saint Louis Ave Apt 3		Amount 4.17	
City Chicago	State IL	Zip Code 60623-1893	Transaction ID : VN7CZA3P6P5
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

(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 Roberto Velazquez		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 108 Puelba Ln		Amount 34.20	
City Kissimmee	State FL	Zip Code 34743-9218	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3NNS4
Name of Federal Candidate Supported or Opposed by Expenditure: Marco Rubio		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought 23693.00		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Roberto Velazquez		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 108 Puelba Ln		Amount 34.20	
City Kissimmee	State FL	Zip Code 34743-9218	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3NQ92
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Murphy		Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: FL District: 00
Calendar Year-To-Date Per Election for Office Sought 23693.00		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 Roberto Velazquez		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 108 Puelba Ln		Amount 34.20	
City Kissimmee	State FL	Zip Code 34743-9218	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3NQP4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Roberto Velazquez		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 108 Puelba Ln		Amount 34.20	
City Kissimmee	State FL	Zip Code 34743-9218	Transaction ID : VN7CZA3NS48
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee AnnMarie Viehweger		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4841 Ute St		Amount 34.20	
City Orlando	State FL	Zip Code 32819-8452	Transaction ID : VN7CZA3NNV0
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee AnnMarie Viehweger		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4841 Ute St		Amount 34.20	
City Orlando	State FL	Zip Code 32819-8452	Transaction ID : VN7CZA3NQR0
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 307 W 6th St		Amount 3.13	
City Royal Oak	State MI	Zip Code 48067-2548	Transaction ID : VN7CZA3NHM6
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 307 W 6th St		Amount 3.13	
City Royal Oak	State MI	Zip Code 48067-2548	Transaction ID : VN7CZA3NHV1
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Andrea Vogler		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 307 W 6th St		Amount 3.13	
City Royal Oak	State MI	Zip Code 48067-2548	Transaction ID : VN7CZA3NJD3
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Andrea Vogler		Date of Public Distribution/Dissemination 09 / 20 / 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: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3NJK1

Full Name (Last, First, Middle Initial) of Payee Damon Walker		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1949 Millvale Ct		Amount 49.56	
City Cincinnati	State OH	Zip Code 45225-1210	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3PXV4

Full Name (Last, First, Middle Initial) of Payee Damon Walker		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1949 Millvale Ct		Amount 49.56	
City Cincinnati	State OH	Zip Code 45225-1210	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3PZC1

(a) SUBTOTAL of Itemized Independent Expenditures.....	102.25
(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 Damon Walker		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1949 Millvale Ct		Amount 49.56	
City Cincinnati	State OH	Zip Code 45225-1210	Transaction ID : VN7CZA3Q0X6
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rob Portman		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Damon Walker		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1949 Millvale Ct		Amount 49.56	
City Cincinnati	State OH	Zip Code 45225-1210	Transaction ID : VN7CZA3Q2E4
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Darnell Walker		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1990 Ford Dr		Amount 68.40	
City Cleveland	State OH	Zip Code 44106-3900	Transaction ID : VN7CZA3P872
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	167.52
(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 Darnell Walker		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1990 Ford Dr		Amount 68.40	
City Cleveland	State OH	Zip Code 44106-3900	Transaction ID : VN7CZA3P9P2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Alexander Walsh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 100 McEntee St Apt 2		Amount 68.40	
City Kingston	State NY	Zip Code 12401-5956	Transaction ID : VN7CZA3NK29
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Alexander Walsh		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 100 McEntee St Apt 2		Amount 68.40	
City Kingston	State NY	Zip Code 12401-5956	Transaction ID : VN7CZA3NM62
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Joyce Ann Ward		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 618 5th Ave # 2		Amount 68.40	
City New Kensington	State PA	Zip Code 15068-6509	Transaction ID : VN7CZA3PBN9
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joyce Ann Ward		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 618 5th Ave # 2		Amount 68.40	
City New Kensington	State PA	Zip Code 15068-6509	Transaction ID : VN7CZA3PCW6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shante Washington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12009 Saywell Ave		Amount 55.86	
City Cleveland	State OH	Zip Code 44108-3834	Transaction ID : VN7CZA3P880
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	192.66
(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 Shante Washington		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 12009 Saywell Ave		Amount 55.86	
City Cleveland	State OH	Zip Code 44108-3834	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 29.72	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 29.72	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.30
(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 Serroge Watt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 29.72	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 29.72	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Serroge Watt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 4.17	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 4.08	
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Serroge Watt		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 4848 San Francisco Ave		Amount 4.08	
City Saint Louis	State MO	Zip Code 63115-2031	
Purpose of Expenditure Per Diem		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.33
(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 Suphie Wesner		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3006 Woodbury Rd		Amount 68.40	
City Shaker Hts	State OH	Zip Code 44120-2441	Transaction ID : VN7CZA3P815
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Suphie Wesner		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3006 Woodbury Rd		Amount 68.40	
City Shaker Hts	State OH	Zip Code 44120-2441	Transaction ID : VN7CZA3P9G6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Ethan West		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 403 Beall St		Amount 77.25	
City Cumberland	State MD	Zip Code 21502-3363	Transaction ID : VN7CZA3PBY1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	214.05
(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 Ethan West		Date of Public Distribution/Dissemination 09 / 20 / 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: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mario Whaley		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1211 S Ruby St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19143-4807	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mario Whaley		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1211 S Ruby St		Amount 68.40	
City Philadelphia	State PA	Zip Code 19143-4807	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	214.05
(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 Maxine White		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1825 Glenridge Dr		Amount 22.80	
City Kernersville	State NC	Zip Code 27284-8667	Transaction ID : VN7CZA3PFM1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Maxine White		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1825 Glenridge Dr		Amount 22.80	
City Kernersville	State NC	Zip Code 27284-8667	Transaction ID : VN7CZA3PH80
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Maxine White		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1825 Glenridge Dr		Amount 22.80	
City Kernersville	State NC	Zip Code 27284-8667	Transaction ID : VN7CZA3PP16
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Maxine White		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1825 Glenridge Dr		Amount 22.80	
City Kernersville	State NC	Zip Code 27284-8667	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3PQK9
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Stephanie White		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1618 Chidell St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-2106	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3PBE4
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Stephanie White		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1618 Chidell St		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15212-2106	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZA3PCN2
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Calendar Year-To-Date Per Election for Office Sought 178527.38		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 Shayolonda Whittier		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 335 Crawford Rd		Amount 22.80	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA3NVB7
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 335 Crawford Rd		Amount 22.80	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA3NW94
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 335 Crawford Rd		Amount 22.80	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA3NZ32
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 Shayolonda Whittier		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 335 Crawford Rd		Amount 22.80	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA3P019
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 335 Crawford Rd		Amount 4.17	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA3P4W9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 335 Crawford Rd		Amount 4.17	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA3P5A0
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.14
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 335 Crawford Rd		Amount 4.17	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA3P6H6
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Shayolonda Whittier		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 335 Crawford Rd		Amount 4.17	
City Saint Louis	State MO	Zip Code 63137-3906	Transaction ID : VN7CZA3P6Y9
Purpose of Expenditure Per Diem	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Glenn Wiggins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5050 Highland Ave Apt 8C		Amount 34.20	
City Saint Louis	State MO	Zip Code 63113-1197	Transaction ID : VN7CZA3Q5V1
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: Roy Blunt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	42.54
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Glenn Wiggins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5050 Highland Ave Apt 8C		Amount 34.20	
City Saint Louis	State MO	Zip Code 63113-1197	Transaction ID : VN7CZA3Q6P4
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: Jason Kander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5548.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Latasha Wilkins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2700 Herdon Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704	Transaction ID : VN7CZA3NVQ1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Burr		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Latasha Wilkins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2700 Herdon Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704	Transaction ID : VN7CZA3NWN8
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Deborah Ross		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 73119.65		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 Latasha Wilkins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2700 Herdon Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704	Transaction ID : VN7CZA3NZF6
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Latasha Wilkins		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2700 Herdon Dr		Amount 22.80	
City Durham	State NC	Zip Code 27704	Transaction ID : VN7CZA3P0D1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rakell Williams		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1275 E 100th St		Amount 55.86	
City Cleveland	State OH	Zip Code 44108-3502	Transaction ID : VN7CZA3P8B4
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	101.46
(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 Rakell Williams		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1275 E 100th St		Amount 55.86	
City Cleveland	State OH	Zip Code 44108-3502	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		515234.22	

Full Name (Last, First, Middle Initial) of Payee Robin Williams		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5100 Chingford Rd		Amount 21.38	
City Columbus	State OH	Zip Code 43232-5314	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		837667.61	

Full Name (Last, First, Middle Initial) of Payee Robin Williams		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 5100 Chingford Rd		Amount 21.38	
City Columbus	State OH	Zip Code 43232-5314	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		515234.22	

(a) SUBTOTAL of Itemized Independent Expenditures.....	98.62
(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 Tyesha Williams		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3816 E 52nd St		Amount 68.40	
City Cleveland	State OH	Zip Code 44105-3314	Transaction ID : VN7CZA3P8E8
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: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tyesha Williams		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 3816 E 52nd St		Amount 68.40	
City Cleveland	State OH	Zip Code 44105-3314	Transaction ID : VN7CZA3P9X7
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 515234.22		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Octavion Wilson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2665 E Juliet Dr		Amount 34.20	
City Deltona	State FL	Zip Code 32738-2435	Transaction ID : VN7CZA3NPR9
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: Patrick Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23693.00		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 Octavion Wilson		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 2665 E Juliet Dr		Amount 34.20	
City Deltona	State FL	Zip Code 32738-2435	Transaction ID : VN7CZA3NRM1
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA3NN23
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		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 09 / 20 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA3NN31
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837667.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	143.20
(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 Windsor Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA3NNB4
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		178527.38	

Full Name (Last, First, Middle Initial) of Payee Windsor Suites		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 1700 Benjamin Franklin Pkwy		Amount 54.50	
City Philadelphia	State PA	Zip Code 19103-2735	Transaction ID : VN7CZA3NNC2
Purpose of Expenditure Lodging	Category/Type	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		178527.38	

Full Name (Last, First, Middle Initial) of Payee Jennifer Zokaite		Date of Public Distribution/Dissemination 09 / 20 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15229-1825	Transaction ID : VN7CZA3PAW2
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		837667.61	

(a) SUBTOTAL of Itemized Independent Expenditures.....	177.40
(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 Jennifer Zokaite		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address 28 Chalfonte Ave		Amount 68.40	
City Pittsburgh	State PA	Zip Code 15229-1825	Transaction ID : VN7CZA3PC30
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kathleen McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 178527.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

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

(a) SUBTOTAL of Itemized Independent Expenditures.....	68.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	77265.78