

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 CASE Action Fund	
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2401 N. Central Ave Suite 120	
(c) City, State and ZIP Code Phoenix, AZ 85004	
2. Occupation and Name of Employer (for Individual Filers Only)	3. FEC Identification Number C 42019

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

07 01 2016

THROUGH

09 30 2016

6. TOTAL CONTRIBUTIONS.....

12,500.00

7. TOTAL INDEPENDENT EXPENDITURES.....

5,647.05

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Brendan Walsh

SIGNATURE

Brendan Walsh

DATE

10/15/16

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

20161015 17:00:00

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

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

NAME OF FILER (In Full)
CASE Action Fund

A. Full Name (Last, First, Middle Initial)
UNITE HERE TIP State & Local Fund

Mailing Address
275 7th Ave

City **New York** **State** **NY** **Zip Code** **10001**

FEC ID number of contributing federal political committee. **C90013376**

Date of Receipt
09 26 2016

Amount of Each Receipt this Period
12500.00

Name of Employer _____ **Occupation** _____

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

Mailing Address

City _____ **State** _____ **Zip Code** _____

FEC ID number of contributing federal political committee. **C**

Date of Receipt

Amount of Each Receipt this Period

Name of Employer _____ **Occupation** _____

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

Mailing Address

City _____ **State** _____ **Zip Code** _____

FEC ID number of contributing federal political committee. **C**

Date of Receipt

Amount of Each Receipt this Period

Name of Employer _____ **Occupation** _____

D. Full Name (Last, First, Middle Initial)

Mailing Address

City _____ **State** _____ **Zip Code** _____

FEC ID number of contributing federal political committee. **C**

Date of Receipt

Amount of Each Receipt this Period

Name of Employer _____ **Occupation** _____

SUBTOTAL of Receipts This Page (optional)	12500.00
TOTAL This Period (last page carry total to Line 6)	12500.00

NOTICE: INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

**SCHEDULE 3-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE Action Fund

Full Name (Last, First, Middle Initial) of Payee ADP		Date of Public Distribution/Dissemination 08 / 26 / 2016	
Mailing Address 1 ADP BLVD		Amount 1457.70	
City Roseland	State NY	Zip Code 07068	
Purpose of Expenditure Organizer Salary(s)	Category/Type ADM	Office Sought: <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 1457.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dominoes		Date of Public Distribution/Dissemination 08 / 29 / 2016	
Mailing Address 2819 N. Catal Ave. Suite 100		Amount 2578	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Food for campaign vols	Category/Type EVN	Office Sought: <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 1483.48		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee UFCW 99		Date of Public Distribution/Dissemination 09 / 02 / 2016	
Mailing Address 2401 N. Central Ave		Amount 393.17	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure org. health insurance Cost reimbursement	Category/Type ADM	Office Sought: <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 1876.65 1483.48		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1876.65
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	5647.05

NOT TO BE FILED SEPARATELY

**SCHEDULE 3-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE Action Fund

Full Name (Last, First, Middle Initial) of Payee Alexis Navarro		Date of Public Distribution/Dissemination 09 02 2016	
Mailing Address 2401 N. Central Ave Suite 100		Amount 1.50	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Gas reimbursement	Category/Type TVL	Office Sought: <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 1878.15		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Alexis Navarro		Date of Public Distribution/Dissemination 09 06 2016	
Mailing Address 2401 N. Central Ave Suite 100		Amount 8.07	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Gas reimbursement	Category/Type TVL	Office Sought: <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 1886.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Sena Mohammed		Date of Public Distribution/Dissemination 09 06 2016	
Mailing Address 2401 N. Central Ave Suite 100		Amount 4.59	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Gas reimbursement	Category/Type TVL	Office Sought: <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 1890.81		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... **14.16**

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures..... **5647.05**
(carry total from last page forward to Line 7)

20160906 10:17:03 AM

SCHEDULE 3-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)
CASE Action Fund

Full Name (Last, First, Middle Initial) of Payee Brendan Walsh		Date of Public Distribution/Dissemination 09 06 2016
Mailing Address 2401 N. Central Ave Suite 100		Amount 4.83
City Phoenix	State Zip Code AZ 85004	
Purpose of Expenditure Food for Campaign vols	Category/Type EVN	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 1895.64 1895.64		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 Walsh		Date of Public Distribution/Dissemination 09 08 2016
Mailing Address 2401 N. Central Ave Suite 100		Amount 39.20
City Phoenix	State Zip Code AZ 85004	
Purpose of Expenditure Food for campaign vols	Category/Type EVN	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 1934.84 1934.84		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Maria Hernandez		Date of Public Distribution/Dissemination 09 09 2016
Mailing Address 2401 N. Central Ave Suite 100		Amount 1324.44
City Phoenix	State Zip Code AZ 85004	
Purpose of Expenditure Organizer salary	Category/Type ADM	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 3259.28 3259.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	1368.47
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	5647.05

20161017 10:01 AM

SCHEDULE 3-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)
CASE Action Fund

Full Name (Last, First, Middle Initial) of Payee Sarah Guturie		Date of Public Distribution/Dissemination 09 12 2016
Mailing Address 2401 N. Central Ave Suite 100		Amount 12.90
City Phoenix	State Zip Code AZ 85004	
Purpose of Expenditure Food for campaign vols	Category/Type EVN	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 3272.18		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 Angulo		Date of Public Distribution/Dissemination 09 14 2016
Mailing Address 2401 N. Central Ave Suite 100		Amount 13.57
City Phoenix	State Zip Code AZ 85004	
Purpose of Expenditure Gas Reimbursement	Category/Type TVL	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 3285.75		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee ADP		Date of Public Distribution/Dissemination 09 14 2016
Mailing Address 1 ADP BLVD		Amount 29.29
City Roseland	State Zip Code NY 07068	
Purpose of Expenditure Organizer Salary	Category/Type ADM	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 3315.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	55.76
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	5647.05

20161017 09:00:00

**SCHEDULE 3-C
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE Action Fund

Full Name (Last, First, Middle Initial) of Payee Sarah Guthrie		Date of Public Distribution/Dissemination 09 12 2016	
Mailing Address 2401 N. Central Ave Suite 100		Amount 13.34	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Gas reimbursement	Category/Type TVL	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 3328.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Costco		Date of Public Distribution/Dissemination 09 15 2016	
Mailing Address 4502 E Oak St.		Amount 22.96	
City Phoenix	State AZ	Zip Code 85008	
Purpose of Expenditure Food for Campaign Vols	Category/Type ADM	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 3351.34		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hugo Soto		Date of Public Distribution/Dissemination 09 16 2016	
Mailing Address 2401 N. Central Ave Suite 100		Amount 29.70	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Gas reimbursement	Category/Type TVL	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 3381.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	66.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	5,647.05

2016-10-17 09:00:00

**SCHEDULE 3-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE Action Fund

Full Name (Last, First, Middle Initial) of Payee Soto, Hugo		Date of Public Distribution/Dissemination 09/16/2016
Mailing Address 2401 N. Central Ave Suite 100		Amount 47.53
City Phoenix	State AZ	
Purpose of Expenditure Food for campaign VOIS		Category/Type EVN
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
Calendar Year-To-Date Per Election for Office Sought 3428.57		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 Angulo, Michael		Date of Public Distribution/Dissemination 09/20/2016
Mailing Address 2401 N. Central Ave Suite 100		Amount 52.93
City Phoenix	State AZ	
Purpose of Expenditure Food for campaign VOIS		Category/Type EVN
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
Calendar Year-To-Date Per Election for Office Sought 3481.50		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 UNITE HERE Local 11		Date of Public Distribution/Dissemination 09/21/2016
Mailing Address 2401 N Central Ave Suite 100		Amount 28.75
City Phoenix	State AZ	
Purpose of Expenditure Campaign organizing Transfer		Category/Type TVL
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
Calendar Year-To-Date Per Election for Office Sought 3510.25		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.....	129.21
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	5,647.05

2016-10-17 09:00:00

**SCHEDULE 3-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE Action Fund

Full Name (Last, First, Middle Initial) of Payee ADP		Date of Public Distribution/Dissemination 09 23 2016	
Mailing Address 1 ADP BLVD		Amount 201097	
City Roseland	State NY	Zip Code 07068	
Purpose of Expenditure Organizer Salary	Category/Type ADM	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 5521.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Costco		Date of Public Distribution/Dissemination 09 26 2016	
Mailing Address 4502 E Oak St.		Amount 17.00	
City Phoenix	State AZ	Zip Code 85008	
Purpose of Expenditure Food for Camp. Vols	Category/Type EVN	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 5538.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Guthrie, Sarah		Date of Public Distribution/Dissemination 09 27 2016	
Mailing Address 2401 N. Central Ave. Suite 100		Amount 14.60	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Campaign Transport	Category/Type JVL	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 5552.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2,042.57
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	5,647.05

20161017 001078887

**SCHEDULE 3-C
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE Action Fund

Full Name (Last, First, Middle Initial) of Payee Soto, Hugo		Date of Public Distribution/Dissemination 09 30 2016
Mailing Address 2401 N. Central Ave Suite 100		Amount 53.46
City Phoenix	State AZ	
Zip Code 85004		
Purpose of Expenditure Campaign Transport	Category/Type TVL	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 5606.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Soto, Hugo		Date of Public Distribution/Dissemination 09 30 2016
Mailing Address 2401 N. Central Ave Suite 100		Amount 12.86
City Phoenix	State AZ	
Zip Code 85004		
Purpose of Expenditure Supplies	Category/Type ADM	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 5619.14		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Soto, Hugo		Date of Public Distribution/Dissemination 09 30 2016
Mailing Address 2401 N. Central Ave. Suite 100		Amount 27.91
City Phoenix	State AZ	
Zip Code 85004		
Purpose of Expenditure Food for camp vols	Category/Type EVN	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 5647.05		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	94.23
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	5,647.05

2016-10-17 09:00:00

Via E-Mail

2016-10-17 09:00:00

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

20161017 10:00:00

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Date of Receipt
<input type="checkbox"/> USPS Priority Mail	Date of Receipt
<input type="checkbox"/> USPS Priority Mail Express	Date of Receipt
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): <i>E-Mail</i>	Date of Receipt or Postmarked <i>10/15/16</i>
 <i>[Signature]</i> PREPARER	 <i>10/17/16</i> DATE PREPARED