

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 Avenue, 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 C90016627

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 **10 27 2016**
THROUGH **11 03 2016**

6. TOTAL CONTRIBUTIONS **12,826.79**
7. TOTAL INDEPENDENT EXPENDITURES **389.85**

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

11/3/16

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

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**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 LOCAL 100 PAC (in-kind)			Date of Receipt 11 / 03 / 2016
Mailing Address 275 7th Avenue, 16th Floor			Amount of Each Receipt this Period 1,716.77
City NEW YORK	State NY	Zip Code 10001	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	

B. Full Name (Last, First, Middle Initial) UNITE HERE TIP STAR ÷ LOCAL PAC (in-kind)			Date of Receipt 11 / 03 / 2016
Mailing Address 275 7th Avenue, 16th Floor			Amount of Each Receipt this Period 880.83
City NEW YORK	State NY	Zip Code 10001	
FEC ID number of contributing federal political committee. C90013376			
Name of Employer		Occupation	

C. Full Name (Last, First, Middle Initial) UNITE HERE TIP STAR ÷ LOCAL PAC (in-kind)			Date of Receipt 11 / 03 / 2016
Mailing Address 275 7th Avenue, 16th Floor			Amount of Each Receipt this Period 10,229.19
City NEW YORK	State NY	Zip Code 10001	
FEC ID number of contributing federal political committee. C90013376			
Name of Employer		Occupation	

D. Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	

SUBTOTAL of Receipts This Page (optional)	12,826.79
TOTAL This Period (last page carry total to Line 6)	12,826.79

NOTIFICATION 0011200000

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee STAPLES		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 28 2016	
Mailing Address 100 WEST OSBOENE ROAD		Amount 13.83	
City Phoenix	State AZ	Zip Code 85013	
Purpose of Expenditure SUPPLIES	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13541.12		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee JARWIN		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 28 2016	
Mailing Address 340 EAST MCDOWELL ROAD		Amount 3.31	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Supplies	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13544.95		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 M M / D D / Y Y Y Y 10 29 2016	
Mailing Address 1646 W. Montebello		Amount 39.92	
City Phoenix	State AZ	Zip Code 85015	
Purpose of Expenditure FOOD	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13584.85		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)	389.85

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**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee LE MEXICANA		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 28 2016	
Mailing Address 2533 N 16th Street		Amount 26.74	
City Phoenix	State AZ	Zip Code 85005	
Purpose of Expenditure Food	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,611.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SUBWAY		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 30 2016	
Mailing Address 530 E McDowell Road		Amount 20.58	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure Food	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,631.67		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Churchs chicken		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 29 2016	
Mailing Address 1544 E Roosevelt		Amount 30.52	
City Phoenix	State AZ	Zip Code 85006	
Purpose of Expenditure Food	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,662.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	77.84
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	389.85

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**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Dominas		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 28 2016	
Mailing Address 219 N CENTRAL AVE		Amount 10.85	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure FOOD	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,673.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee WARMO RESTAURANT		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 27 2016	
Mailing Address 5050 E. McDowell Road		Amount 29.50	
City Phoenix	State AZ	Zip Code 85008	
Purpose of Expenditure FOOD	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,700.53		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Juan's Authentic Mexican		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 27 2016	
Mailing Address 1516 E. THOMAS ROAD		Amount 9.38	
City Phoenix	State AZ	Zip Code 85914	
Purpose of Expenditure FOOD	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,709.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	47.73
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	389.85

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**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee TOMAS Robles		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 11 / 01 / 2016	
Mailing Address 6308 W. Hughes Drive		Amount 85.39	
City Phoenix	State AZ	Zip Code 85043	
Purpose of Expenditure TRIPS	Category/Type COM	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,795.30		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SARWAN		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 / 31 / 2016	
Mailing Address 340 E. McDowell Road		Amount 1.87	
City Phoenix	State AZ	Zip Code 85004	
Purpose of Expenditure WATER	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,797.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Little Caesars		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 / 31 / 2016	
Mailing Address 2950 N. 32nd Street		Amount 13.58	
City Phoenix	State AZ	Zip Code 85018	
Purpose of Expenditure FOOD	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,810.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	, , 100.84
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	, , .
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	, , 389.85

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**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee SARAH		Date of Public Distribution/Dissemination M / D / Y Y Y Y 10 31 2016	
Mailing Address 520 W. OSBORN		Amount 8.15	
City Phoenix	State AZ	Zip Code 85013	
Purpose of Expenditure SUPPLIES	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,818.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee TARGET		Date of Public Distribution/Dissemination M / D / Y Y Y Y 11 01 2016	
Mailing Address 4515 F. THOMAS ROAD		Amount 3.80	
City Phoenix	State AZ	Zip Code 85018	
Purpose of Expenditure SUPPLIES	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,822.69		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 M / D / Y Y Y Y 11 01 2016	
Mailing Address 1300 W. McDowell ROAD		Amount 27.07	
City Phoenix	State AZ	Zip Code 85523	
Purpose of Expenditure FOOD / Refreshments	Category/Type E V N	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,849.75		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	39.02
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶ (carry total from last page forward to Line 7)	389.85

NOTATION ON BOTTOM

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CASE ACTION FUND

NON-FEDERAL CAMPAIGN

Full Name (Last, First, Middle Initial) of Payee Michael's		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 31 2016	
Mailing Address 1925 E. CAMERON ROAD #132		Amount 7.04	
City Phoenix	State AZ	Zip Code 85016	
Purpose of Expenditure SUPPLIES	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,856.79		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Phoenix PARKS		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 31 2016	
Mailing Address 200 W. WASHINGTON Street		Amount 5.00	
City Phoenix	State AZ	Zip Code 85003	
Purpose of Expenditure Event site rental	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,861.79		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 M M / D D / Y Y Y Y 11 01 2016	
Mailing Address 1000 W. McDowell Road		Amount 7.02	
City Avondale	State AZ	Zip Code 85323	
Purpose of Expenditure Food / refreshments	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13,868.81		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....			19.06
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)			389.85

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 7 OF 7
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
CHASE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Dominos		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 11 02 2016
Mailing Address 219 Central Avenue		Amount 35.80
City Phoenix	State Zip Code AZ 85008	
Purpose of Expenditure FOOD/Refreshments	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 13,904.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Panaderia Averreo		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 11 01 2016
Mailing Address 2829 N. 32nd Street		Amount 12.50
City Phoenix	State Zip Code AZ 85008	
Purpose of Expenditure Food/Refreshments	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: TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 13,917.11		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 M M / D D / Y Y Y Y
Mailing Address		Amount
City	State Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
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.....	48.30
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	389.85

NON-FUNCTIONAL DOCUMENT

Via E-Mail

201611071200117994

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS First Class Mail	Postmarked	Date of Receipt
------------------------------------------------	------------	-----------------

<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
----------------------------------------------------	------------------

<input type="checkbox"/> USPS Priority Mail	Postmarked
---------------------------------------------	------------

<input type="checkbox"/> USPS Priority Mail Express	Postmarked
-----------------------------------------------------	------------

<input type="checkbox"/> Postmark Illegible	
---------------------------------------------	--

<input type="checkbox"/> No Postmark	
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<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>11/5/16</i>

<i>R</i> PREPARER	<i>11/7/16</i> DATE PREPARED
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NOV 10 11 00 AM '16