

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 THE PEOPLE'S LOBBY		3. FEC Identification Number C C90015868
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1659 W HUBBARD ST. BASEMENT		
(c) City, State and ZIP Code CHICAGO IL 60622		
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..... .00

7. TOTAL INDEPENDENT EXPENDITURES 15493.71

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
West, Nzinga, , ,	<i>West, Nzinga, , ,</i>	03/08/2020

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)
THE PEOPLE'S LOBBY

Full Name (Last, First, Middle Initial) of Payee Campos, Rigoberto, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 29 / 2020	
Mailing Address 4207 S California		Amount 2488.68	
City Chicago	State IL	Zip Code 60632	Transaction ID : F57.000001
Purpose of Expenditure Canvassing	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Newman, Marie, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Sanford, Kristi, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 29 / 2020	
Mailing Address 1423 W. Greenleaf #2S		Amount 298.66	
City Chicago	State IL	Zip Code 60626	Transaction ID : F57.000002
Purpose of Expenditure Design of materials/general communications	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Newman, Marie, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cho, Seong-Ah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 29 / 2020	
Mailing Address 5225 S Blackstone Ave		Amount 4050.67	
City Chicago	State IL	Zip Code 60615	Transaction ID : F57.000003
Purpose of Expenditure Organizing/Canvassing	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Newman, Marie, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	6838.01
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
THE PEOPLE'S LOBBY

Full Name (Last, First, Middle Initial) of Payee Johnson, Kylah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 29 / 2020	
Mailing Address 908 N Western Ave, Apt 2F		Amount 930.00	
City Chicago	State IL	Zip Code 60622	Transaction ID : F57.000004
Purpose of Expenditure Organizing Canvass	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Newman, Marie, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kuehner, Mark, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 29 / 2020	
Mailing Address 2250 Orchard St.		Amount 1485.50	
City Blue Island	State IL	Zip Code 60406	Transaction ID : F57.000005
Purpose of Expenditure Canvassing	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Newman, Marie, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Padilla, Jospeh, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 29 / 2020	
Mailing Address 1934 W Winona St Unit 1		Amount 1871.06	
City Chicago	State IL	Zip Code 60640	Transaction ID : F57.000006
Purpose of Expenditure Canvassing	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Newman, Marie, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	4286.56
(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)
THE PEOPLE'S LOBBY

Full Name (Last, First, Middle Initial) of Payee Popadiak, Marta, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 29 / 2020	
Mailing Address 3634 N Linder Ave		Amount 2445.17	
City Chicago	State IL	Zip Code 60641	Transaction ID : F57.000007
Purpose of Expenditure Organizing/Canvassing	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Newman, Marie, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Tanzman, Will, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 29 / 2020	
Mailing Address 5358 S. Indiana, #2S		Amount 1660.88	
City Chicago	State IL	Zip Code 60615	Transaction ID : F57.000008
Purpose of Expenditure Organizing /Canvassing	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Newman, Chicago, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Cho, Seong-Ah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 25 / 2020	
Mailing Address 5225 S Blackstone Ave		Amount 12.12	
City Chicago	State IL	Zip Code 60615	Transaction ID : F57.000009
Purpose of Expenditure Mileage	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Newman, Marie, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	4118.17
(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)
THE PEOPLE'S LOBBY

Full Name (Last, First, Middle Initial) of Payee Cho, Seong-Ah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 25 / 2020	
Mailing Address 5225 S Blackstone Ave		Amount 250.97	
City Chicago	State IL	Zip Code 60615	Transaction ID : F57.000010
Purpose of Expenditure Dialer + Snacks + General Supplies	Category/ Type 006	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Newman, Marie, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought00		Disbursement For: <input checked="" 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) ▶	

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.....	▶	250.97
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	15493.71