

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

NAME OF COMMITTEE (In Full) <b>National Nurses United for Patient Protection</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00490375                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Direct Opportunities Group, LLC</b>			Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 10 / 18 / 2016		
Mailing Address 228 Park Avenue South 28822			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">                     25000.00                 </div>		
City New York	State NY	Zip Code 10003			
Purpose of Expenditure Digital ad buy & production costs		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>D821659</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 10 / 17 / 2016		
Name of Federal Candidate: CRAIG, ANGELA, DAWN, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>02</u> State: <u>MN</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">25000.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item <b>Direct Opportunities Group, LLC</b>			Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 10 / 18 / 2016		
Mailing Address 228 Park Avenue South 28822			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">                     25000.00                 </div>		
City New York	State NY	Zip Code 10003			
Purpose of Expenditure Digital ad buy & production costs		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>D821660</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 10 / 17 / 2016		
Name of Federal Candidate: TEACHOUT, ZEPHYR, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>19</u> State: <u>NY</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">25000.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">50000.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">100000.00</div>

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

*Kuhl, Martha, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Signature