| Schedule E)                                      |                             |                       | FOR SE OF FORM 24/48   |
|--|-----------------------------|-----------------------|--|
| NAME OF COMMITTEE (In Fu                         |                             |                       | FEC IDENTIFICATION NUMBER ▼  |
| Working America Co                               | alition                     |                       | C C00620583  |
|  |                             |                       |  |
| Check if 24-hour report                          | 48-hour report New r        | eport Amends repor    | t filed on   |
| Full Name of Payee  Mosaic                       |                             |                       | Date of Public Distribution/Dissemination  |
|  |                             |                       | 10 27 2016   |
| Mailing Address 4801 Viev                        | wpoint Place                |                       | Amount   |
| City   | State                       | Zip Code              | 120.00   |
| Cheverly   | MD                          | 20781                 | Transaction ID : D612717  Date of Disbursement or Obligation   |
| Purpose of Expenditure Fliers                    |                             | Category/<br>Type     | 11 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| Name of Federal Candidat                         | е                           | <b>x</b> Support      | Office Sought:   |
| HARTMAN, CHRISTINA, N                            | MARIE, MS.,                 | Oppose                | President Senate State: PA   |
| Calendar Year-To-Date<br>Per Election for Office |                             | 1614.00               | Disbursement For: Primary   General  Other (specify)   ☐ Other (specify)                                 |
| Full Name of Payee The Pivot Group, Ir           |                             | ·                     | Date of Public Distribution/Dissemination  |
| The Pivot Group, if                              | IG.                         |                       | 10 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| Mailing Address 1720 I                           | Street, NW #550             |                       | Amount   |
| City   | State                       | Zip Code              | 594.00   |
| Washington                                       | DC                          | 20006                 | Transaction ID : D612747  Date of Disbursement or Obligation   |
| Purpose of Expenditure Fliers                    |                             | Category/<br>Type     | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| Name of Federal Candidat                         | re                          | <b>✗</b> Support      | Office Sought:   |
| HARTMAN, CHRISTINA, N                            | MARIE, MS.,                 | Oppose                | President Senate State: PA   |
| Calendar Year-To-Date<br>Per Election for Office |                             | 1614.00               | Disbursement For: Primary   General  Other (specify)   ☐ Other (specify)                                 |
|  |                             | ·                     |  |
| (a) SUBTOTAL of Itemized                         | Independent Expenditures    |                       | 714.00   |
| (b) SUBTOTAL of Unitemiz                         | ed Independent Expenditures |                       | <b>•</b>   |
| (c) TOTAL Independent Ex                         | penditures                  |                       | <b>•</b>   |
| with, or at the request or su                    |                             | •                     | not made in cooperation, consultation, or concert either, or (if the reporting entity is not a political |
| King, Crystal, , ,                               |                             | conically Filed] Date | 11 03 2016   |
| Signature  |                             |                       |  |

| · · · · · · · · · · · · · · · · · ·                  | FOR SE OF FORM 24/48   |
|--|--|
| NAME OF COMMITTEE (In Full)                          | FEC IDENTIFICATION NUMBER ▼  |
| Working America Coalition                            | C C00620583  |
| Check if 24-hour report 48-hour report               | New report Amends report filed on Amends report filed on   |
| Full Name of Payee                                   | Date of Public Distribution/Dissemination  |
| Mosaic   | M M / D D / Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1  |
| Mailing Address 4801 Viewpoint Place                 | Amount   |
| City State   | e Zip Code 300.00  |
| Cheverly MD  |  |
| Purpose of Expenditure<br>Fliers                     | Category/<br>Type 004 11 / 02 / 2016   |
| Name of Federal Candidate                            | Support Office Sought: House District:   |
| Rodham Clinton, Hillary, , ,                         | Oppose President Senate State:   |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: Primary   349186.38   Other (specify)   ☐ Other (specify)  |
| Full Name of Payee Mosaic                            | Date of Public Distribution/Dissemination  11 02 2016  |
| Mailing Address 4801 Viewpoint Place                 | 11 02 2016<br>Amount   |
| City State   | e Zip Code 150.00  |
| Cheverly MD  | 20781 Transaction ID : D616086 Date of Disbursement or Obligation  |
| Purpose of Expenditure<br>Fliers                     | Category/ Type 004 11 02 / 2016  |
| Name of Federal Candidate                            | Support Office Sought: House District:   |
| Rodham Clinton, Hillary, , ,                         | Oppose President Senate State:   |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: Primary   349186.38  Disbursement For: Primary   Cother (specify)   ✓  |
| (a) SUBTOTAL of Itemized Independent Expenditures    | 450.00   |
| (b) SUBTOTAL of Unitemized Independent Expenditures  |  |
| (c) TOTAL Independent Expenditures                   | ······································   |
|  | enditures reported herein were not made in cooperation, consultation, or concert authorized committee or agent of either, or (if the reporting entity is not a political |
| King, Crystal, , , Signature                         | [Electronically Filed] Date 11 03 2016   |
| Oignature  |  |

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| Sc      | chedule E)   | 1 111111     |                   |            |                   |                              | PAGE 3<br>FOR SE OF                    | OF 16<br>FORM 24/48 |          |
|---------|--|--------------|-------------------|------------|-------------------|------------------------------|--|---------------------|----------|
|         | ME OF COMMITTEE (In Full)  |              |                   |            |                   | FEC ID                       |  | ON NUMBER           | <b>—</b> |
| W       | orking America Coalition   |              |                   |            |                   |                              | C00620583                              |                     |          |
| <br>Che | eck if <b>X</b> 24-hour report 48-hour report  | New repo     | ort Am            | nends repo | ort filed on      | M = M /                      | D D /                                  | Y                   |          |
| Т       | Full Name of Payee   |              |                   |            | Da                | ate of Public                | Distribution                           | /Dissemination      |          |
|         | Mosaic   |              |                   |            |                   | 11                           | 02                                     | 2016                |          |
|         | Mailing Address 4801 Viewpoint Place   |              |                   |            | Ar                | mount                        |  |                     |          |
| Ì       | City State   | <del>,</del> | Zip Code          |            |                   |                              |  | 60.00               |          |
|         | Cheverly MD  |              | 20781             |            |                   |                              | <b>D</b> : <b>D616087</b> rsement or ( | Obligation          | _        |
|         | Purpose of Expenditure<br>Fliers   |              | Category/<br>Type | 004        |                   | 11 /                         | 02                                     | 2016                |          |
| 1       | Name of Federal Candidate  |              | x s               | Support    | Office So         | ought:                       | House                                  | District:           |          |
|         | Rodham Clinton, Hillary, , ,   |              |                   | Oppose     | X Pre             |                              | Senate                                 | State:              |          |
|         | Calendar Year-To-Date Per Election for Office Sought   |              | 349186.38         |            | Disburser<br>2016 | ment For:                    | Primary                                | <b>x</b> Gener      | al       |
|         | Full Name of Payee   |              |                   |            | Da                | ate of Public                | Distribution                           | /Dissemination      |          |
|         | Mosaic   |              |                   |            |                   | M = M /                      | 02                                     | 2016                | Υ        |
| Ì       | Mailing Address 4801 Viewpoint Place   |              |                   |            | A                 | mount                        | 02                                     | 2016                | _        |
|         |  |              |                   |            |                   | mount                        |  |                     | _        |
|         | City State   | ÷            | Zip Code          |            |                   |                              |  | 150.00              |          |
|         | Cheverly MD  |              | 20781             |            |                   | ansaction ID<br>ate of Disbu | <b>D: D616088</b> Irsement or (        | Obligation          |          |
| Ì       | Purpose of Expenditure<br>Fliers   |              | Category/<br>Type | 004        |                   | 11 /                         | 02                                     | 2016                | Y        |
| ľ       | Name of Federal Candidate  |              | <b>x</b> 9        | Support    | Office So         | ought:                       | <b>⊀</b> House                         | District: 16        | _        |
|         | HARTMAN, CHRISTINA, MARIE, MS.,  |              |                   | Oppose     | Pre               | esident                      | Senate                                 | State: PA           |          |
|         | Calendar Year-To-Date Per Election for Office Sought   |              | 1614.00           |            | Disburse<br>2016  | ment For: Other (sp          | Primary                                | Gener X             | al<br>—  |
|         |  |              |                   |            |                   |                              |  |                     | 7        |
| (       | (a) SUBTOTAL of Itemized Independent Expenditures  |              |                   |            | . •               |                              | 7                                      | 210.00              | _        |
| (       | (b) SUBTOTAL of Unitemized Independent Expenditures  |              |                   |            | ·· •              |                              |  |                     |          |
| (       | (c) TOTAL Independent Expenditures   |              |                   |            | •                 | 1 1 4                        | 1 1 1                                  |                     |          |
| ٧       | Under penalty of perjury I certify that the independent experience with, or at the request or suggestion of, any candidate or a party committee) any political party committee or its agent. | authorized   |                   |            |                   |                              |  |                     |          |
|         |  | [Electron    | ically Filed]     | Date       | M M M             | / 03                         | / Y Y 201                              | 6                   |          |
|         | Signature  |              | _                 |            |                   |                              |  |                     |          |

|     | neddie E)  | FOR SE OF FORM 24/48   |
|-----|--|--|
|     | ME OF COMMITTEE (In Full)  | FEC IDENTIFICATION NUMBER ▼                                  |
| VV  | orking America Coalition   | C C00620583  |
| Che | eck if X 24-hour report 48-hour report New report Amends report filed  | on M M / D D / Y Y Y Y Y                                     |
| Т   | Full Name of Payee   | Date of Public Distribution/Dissemination                    |
|     | Mosaic   | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                  |
|     | Mailing Address 4801 Viewpoint Place   | Amount   |
| ŀ   | City State Zip Code  | 60.00  |
|     | Cheverly MD 20781  | Transaction ID : D616089  Date of Disbursement or Obligation |
| ľ   | Purpose of Expenditure Fliers  Category/ Type 004  | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                  |
| ı   | Name of Federal Candidate Support Office   | Sought: House District:                                      |
|     | Rodham Clinton Hillary   | President Senate State:                                      |
|     | Calcinati Teal to Bate   | rrsement For: Primary 🗶 General                              |
| ļ   | Per Election for Office Sought 349186.38 2016  | Other (specify)  |
|     | Full Name of Payee  Mosaic   | Date of Public Distribution/Dissemination                    |
|     | Mailing Address 4801 Viewpoint Place   | 11 02 2016   |
|     |  | Amount   |
| ľ   | City State Zip Code  | 150.00   |
|     | Cheverly MD 20781  | Transaction ID : D616090  Date of Disbursement or Obligation |
|     | Purpose of Expenditure Fliers  Category/ Type  004   | 11 02 / 2016   |
| ŀ   | Name of Federal Candidate Support Office   | e Sought: House District:                                    |
|     |  | President Senate State:                                      |
|     | Calendar Year-To-Date Per Election for Office Sought  Disbut 2016  |  |
|     |  | Other (specify) ►  |
| (   | (a) SUBTOTAL of Itemized Independent Expenditures  | 210.00   |
| (   | (b) SUBTOTAL of Unitemized Independent Expenditures  |  |
| (   | (c) TOTAL Independent Expenditures   |  |
|     |  |  |
| ٧   | Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either coarty committee) any political party committee or its agent. |  |
|     | King, Crystal, , ,   |  |
|     | [Electronically Filed] Date 1  | 1 03 2016  |
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OF

|   |  | FOR SE OF FORM 24/48                            |
|---|--|---|
| NAME OF COMMITTEE (In Full)   | F                                      | EC IDENTIFICATION NUMBER ▼                      |
| Working America Coalition   |  | C C00620583                                     |
| Check if 24-hour report 48-hour report New report A   | mends report filed on                  | M / D = D / Y = Y = Y = Y                       |
| Full Name of Payee  | Date of                                | Public Distribution/Dissemination               |
| Mosaic  |  | 1 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y        |
| Mailing Address 4801 Viewpoint Place  | Amount                                 |   |
| City State Zip Code   |  | 240.00  |
| Cheverly MD 20781   |  | ction ID : D616091 Disbursement or Obligation   |
| Purpose of Expenditure Fliers  Category Typ   | // 004                                 | 1 02 2016                                       |
| Name of Federal Candidate   | Support Office Sought:                 | House District:                                 |
| Rodham Clinton, Hillary, , ,  | Oppose  Presiden                       | st Senate State:                                |
| Calendar Year-To-Date Per Election for Office Sought 349186.3   | Disbursement 2016 Oth                  | For: Primary <b>x</b> General er (specify) ►    |
| Full Name of Payee  Mosaic  | Date of                                | Public Distribution/Dissemination               |
| Maillian Address  |  | 1 02 2016                                       |
| Mailing Address 4801 Viewpoint Place  | Amount                                 | t   |
| City State Zip Code   |  | 240.00  |
| Cheverly MD 20781   |  | tion ID : D616092<br>Disbursement or Obligation |
| Purpose of Expenditure Fliers  Category Typ   |  | 1 02 2016                                       |
| Name of Federal Candidate   | Support Office Sought:                 | House District:                                 |
| Rodham Clinton, Hillary, , ,  | Oppose                                 | Senate State:                                   |
| Calendar Year-To-Date Per Election for Office Sought 349186.3   | Disbursement 2016 Oth                  | For:  Primary <b>X</b> General ner (specify) ▶  |
| (a) SUBTOTAL of Itemized Independent Expenditures   | ······································ | 480.00  |
| (b) SUBTOTAL of Unitemized Independent Expenditures   |  | 7 1 7 1 5                                       |
| (c) TOTAL Independent Expenditures  | ······································ | 7 7 7   |
| Under penalty of perjury I certify that the independent expenditures reported by with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent. |  |   |
| King, Crystal, , ,  [Electronically Filed]  | Date 11                                | 03 2016   |
| Signature   |  |   |

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| ooneddic Ly  | FOR SE OF FORM 24/48                                       |
|--|--|
| NAME OF COMMITTEE (In Full)  | FEC IDENTIFICATION NUMBER ▼                                |
| Working America Coalition  | C C00620583  |
| Check if 24-hour report 48-hour report New report Amends report filed on   | M = M / D = D / Y = Y = Y                                  |
|  | te of Public Distribution/Dissemination                    |
| Mosaic   | M 1  |
| Mailing Address 4801 Viewpoint Place Am  | nount  |
| City State Zip Code  | 180.00   |
| Cheverly MD 20781 Tra  | ansaction ID : D616093 tte of Disbursement or Obligation   |
| Purpose of Expenditure Fliers  Category/ Type  004   | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                |
| Name of Federal Candidate      X   Support   Office Sou  | ught: X House District: 16                                 |
| HARTMAN, CHRISTINA, MARIE, MS., Oppose Pres  | sident Senate State: PA                                    |
| Calendar Year-To-Date Per Election for Office Sought  Disbursem 2016   | nent For:  |
| Full Name of Payee Da  | ate of Public Distribution/Dissemination                   |
| Mailing Address 4801 Viewpoint Place An  | 11 02 2016<br>nount  |
| City State Zip Code  | 300.00   |
| Cheverly MD 20781 Trai   | nsaction ID : D616094<br>ate of Disbursement or Obligation |
| Purpose of Expenditure Fliers  Category/ Type  004   | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                |
| Name of Federal Candidate  | ught: House District:                                      |
| MCGINTY, KATHLEEN, ALANA, , Oppose Pre   | esident Senate State: PA                                   |
| Calendar Year-To-Date Per Election for Office Sought  Disbursen 23422.20   | ment For:  |
| (a) SUBTOTAL of Itemized Independent Expenditures  | 480.00   |
| (b) SUBTOTAL of Unitemized Independent Expenditures  |  |
| (c) TOTAL Independent Expenditures   |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made i with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent. |  |
| King, Crystal, , ,  [Electronically Filed] Date 11   | 03 2016  |
| Signature  |  |

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|    | silicatic Ly   | FOR SE OF FORM 24/48   |
|----|--|--|
|    | AME OF COMMITTEE (In Full)   | FEC IDENTIFICATION NUMBER ▼                                  |
| ٧  | Vorking America Coalition  | C C00620583  |
| Ch | neck if X 24-hour report 48-hour report New report Amends report filed   | on M M / D D / Y Y Y Y Y                                     |
|    | Full Name of Payee   | Date of Public Distribution/Dissemination                    |
|    | Mosaic   | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                  |
|    | Mailing Address 4801 Viewpoint Place   | Amount   |
|    | City State Zip Code  | 150.00   |
|    | Cheverly MD 20781  | Transaction ID : D616095  Date of Disbursement or Obligation |
|    | Purpose of Expenditure Fliers  Category/ Type 004  | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                  |
|    | Name of Federal Candidate Support Office   | e Sought: House District:                                    |
|    | MCGINTY, KATHLEEN, ALANA, , Oppose   | President Senate State: PA                                   |
|    | Calendar Year-To-Date Per Election for Office Sought  Disbut 23422.20  Disbut 2016   | Primary General  |
|    | Full Name of Payee   | Other (specify)  |
|    | Mosaic   | Date of Public Distribution/Dissemination                    |
|    | Mailing Address 4801 Viewpoint Place   | 11 02 2016<br>Amount   |
|    | City State Zip Code  | 60.00  |
|    | Cheverly MD 20781  | Transaction ID : D616096 Date of Disbursement or Obligation  |
|    | Purpose of Expenditure Fliers  Category/ Type  004   | 11 02 2016   |
|    | Name of Federal Candidate Support Office   | e Sought: House District:                                    |
|    | MCGINTY, KATHLEEN, ALANA, , Oppose   | President Senate State: PA                                   |
|    | Calendar Year-To-Date Per Election for Office Sought  Disbut 2016  | orsement For: Primary   General  Other (specify)             |
|    | (a) SUBTOTAL of Itemized Independent Expenditures  | 210.00   |
|    | (b) SUBTOTAL of Unitemized Independent Expenditures  |  |
|    | (c) TOTAL Independent Expenditures   |  |
|    | Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent. |  |
|    | King, Crystal, , ,  [Electronically Filed] Date 1  | 1 03 2016  |
|    | Signature  |  |
|    |  |  |

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| Schedule E)   | FOR SE OF FORM 24/48   |
|---|--|
| NAME OF COMMITTEE (In Full)   | FEC IDENTIFICATION NUMBER ▼                                  |
| Working America Coalition   | C C00620583  |
|   | 0,   |
| Check if 24-hour report 48-hour report New report Amends report file  | ed on Mam / Dab / Yayayay                                    |
| Full Name of Payee  | Date of Public Distribution/Dissemination                    |
| Mosaic  | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                  |
| Mailing Address 4801 Viewpoint Place  | Amount   |
| City State Zip Code   | 60.00  |
| Cheverly MD 20781   | Transaction ID : D616097 Date of Disbursement or Obligation  |
| Purpose of Expenditure Fliers  Category/ Type  004  | 11   |
| Name of Federal Candidate Support Offi  | ce Sought: House District:                                   |
| MCGINTY, KATHLEEN, ALANA, , Oppose  | President Senate State: PA                                   |
| Calendar Year-To-Date Per Election for Office Sought  Discussion 23422.20   | bursement For: Primary General  Other (specify)              |
| Full Name of Payee  | Date of Public Distribution/Dissemination                    |
| Mosaic  | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                  |
| Mailing Address 4801 Viewpoint Place  | Amount   |
| City State Zip Code   | 150.00   |
| Cheverly MD 20781   | Transaction ID : D616098  Date of Disbursement or Obligation |
| Purpose of Expenditure Fliers  Category/ Type  004  | M 11 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y              |
| Name of Federal Candidate Support Offi  | ice Sought: House District:                                  |
| MCGINTY, KATHLEEN, ALANA, , Oppose  | President Senate State: PA                                   |
| Calendar Year-To-Date Per Election for Office Sought  Dis 23422.20  | bursement For: Primary <b>X</b> General 16 Other (specify) ▶ |
| (a) SUBTOTAL of Itemized Independent Expenditures   | 210.00   |
|   |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures   | 7 7 7  |
| (c) TOTAL Independent Expenditures  |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not r with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent. |  |
| King, Crystal, , ,  [Electronically Filed] Date   | 11 03 2016   |
| Oignature   |  |

| <b>,</b>  | FOR SE OF FORM 24/48   |
|---|--|
| NAME OF COMMITTEE (In Full)   | FEC IDENTIFICATION NUMBER ▼                                  |
| Working America Coalition   | C C00620583  |
| Check if 24-hour report 48-hour report New report Amends report fi  | iled on Mam / Dad / Yayayay                                  |
| Full Name of Payee  | Date of Public Distribution/Dissemination                    |
| Mosaic  | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                  |
| Mailing Address 4801 Viewpoint Place  | Amount   |
| City State Zip Code   | 200.00   |
| Cheverly MD 20781   | Transaction ID : D616099  Date of Disbursement or Obligation |
| Purpose of Expenditure Fliers  Category/ Type  004  | 11 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                    |
| Name of Federal Candidate   | ffice Sought: X House District: 08                           |
| Santarsiero, Steven, J., , Oppose   | President Senate State: PA                                   |
| Odioridal Todi To Dato  | isbursement For: Primary   General  Other (specify) ▶        |
| Full Name of Payee  | Date of Public Distribution/Dissemination                    |
| Mosaic  | M M / D D / Y Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y            |
| Mailing Address 4801 Viewpoint Place  | Amount   |
| City State Zip Code   | 30.00  |
| Cheverly MD 20781   | Transaction ID : D616100  Date of Disbursement or Obligation |
| Purpose of Expenditure Fliers  Category/ Type  004  | 11 02 / 2016   |
| Name of Federal Candidate Support O   | ffice Sought: House District:                                |
| D II OF ( 189   | President Senate State:                                      |
|   | isbursement For:   |
| (a) SUBTOTAL of Itemized Independent Expenditures   | 230.00   |
| (b) SUBTOTAL of Unitemized Independent Expenditures   |  |
| (c) TOTAL Independent Expenditures  |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of ei party committee) any political party committee or its agent. |  |
| King, Crystal, , ,  [Electronically Filed] Date   | 11 03 2016   |
| Signature   |  |

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| Schedule E)   | I EXI END         | TOTILO                |   | PAGE 10 OF 16<br>FOR SE OF FORM 24/48                   |
|---|-------------------|-----------------------|---|---|
| NAME OF COMMITTEE (In Full)   |                   |                       | F                                       | FEC IDENTIFICATION NUMBER ▼                             |
| Working America Coalition   |                   |                       |   | C C00620583   |
| Check if 24-hour report 48-hour report  | X New repo        | ort Amends repo       | ort filed on                            | M / D = D / Y = Y = Y                                   |
| Full Name of Payee Mosaic   |                   |                       |   | Public Distribution/Dissemination                       |
| Mailing Address 4801 Viewpoint Place  |                   |                       | Amount                                  | 11 02 2016<br>t   |
| City  | State             | Zin Codo              |   | 20.00   |
| City Cheverly   | MD                | Zip Code<br>20781     |   | 60.00  ction ID : D616101  f Disbursement or Obligation |
| Purpose of Expenditure<br>Fliers  |                   | Category/<br>Type 004 | М                                       | 11 02 2016  |
| Name of Federal Candidate   |                   | <b>✗</b> Support      | Office Sought:                          | House District:   |
| Rodham Clinton, Hillary, , ,  |                   | Oppose                | <b>x</b> Presider                       |   |
| Calendar Year-To-Date Per Election for Office Sought  | , ,               | 349186.38             | Disbursement 2016 Oth                   | For: Primary <b>X</b> General ner (specify) ▶           |
| Full Name of Payee  |                   |                       | Date of                                 | f Public Distribution/Dissemination                     |
| Mosaic  |                   |                       |   | 11 02 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y             |
| Mailing Address 4801 Viewpoint Place  |                   |                       | Amoun                                   | لىننى لنا ك   |
| City  | State             | Zip Code              | — I                                     | 60.00   |
| Cheverly  | MD                | 20781                 |   | ction ID : D616102<br>f Disbursement or Obligation      |
| Purpose of Expenditure<br>Fliers  |                   | Category/<br>Type 004 |   | 11 02 / Y Y Y Y Y                                       |
| Name of Federal Candidate   |                   | <b>✗</b> Support      | Office Sought:                          | : House District:                                       |
| MCGINTY, KATHLEEN, ALANA, ,   |                   | Oppose                | Presider                                | nt Senate State: PA                                     |
| Calendar Year-To-Date Per Election for Office Sought  | , , ,             | 23422.20              | Disbursement<br>2016 Oth                | For: Primary   General her (specify)                    |
| (a) SUBTOTAL of Itemized Independent Expenditure  | es                |                       |   | 120.00  |
|   |                   |                       |   | 4 4   |
| (b) SUBTOTAL of Unitemized Independent Expendi  | tures             |                       | ·· •                                    | 4 4 4   |
| (c) TOTAL Independent Expenditures  |                   |                       | · .                                     | 7 7 7   |
| Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its | ate or authorized |                       |   |   |
| King, Crystal, , ,  | [Electron         | ically Filed] Date    | M M / / / / / / / / / / / / / / / / / / | 03 2016   |
| Signature   |                   |                       |   |   |

| <b>,</b>   | FOR SE OF FORM 24/48   |
|--|--|
| NAME OF COMMITTEE (In Full)  | FEC IDENTIFICATION NUMBER ▼                                  |
| Working America Coalition  | C C00620583  |
| Check if 24-hour report 48-hour report New report Amends   | report filed on Man / Dad / Yayayay                          |
| Full Name of Payee   | Date of Public Distribution/Dissemination                    |
| Mosaic   | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                  |
| Mailing Address 4801 Viewpoint Place   | Amount   |
| City State Zip Code  | 150.00   |
| Cheverly MD 20781  | Transaction ID : D616103  Date of Disbursement or Obligation |
| Purpose of Expenditure Fliers  Category/ Type  | 004 11 02 2016   |
| Name of Federal Candidate Suppo  | ort Office Sought: House District:                           |
| MCGINTY, KATHLEEN, ALANA, , Oppos  |  |
| Calendar Year-To-Date Per Election for Office Sought 23422.20  | Disbursement For: Primary   General  2016  Other (specify) ▶ |
| Full Name of Payee  Mosaic   | Date of Public Distribution/Dissemination                    |
| Malling Address  | 11 02 / Y Y Y Y  |
| Mailing Address 4801 Viewpoint Place   | Amount   |
| City State Zip Code  | 240.00   |
| Cheverly MD 20781  | Transaction ID : D616104  Date of Disbursement or Obligation |
| Purpose of Expenditure Fliers  Category/ Type  | 004 11 02 2016   |
| Name of Federal Candidate Suppo  | ort Office Sought: House District:                           |
| MCGINTY, KATHLEEN, ALANA, , Oppos  | See President Senate State: PA                               |
| Calendar Year-To-Date Per Election for Office Sought 23422.20  | Disbursement For:  |
| (a) SUBTOTAL of Itemized Independent Expenditures  | 390.00   |
| (b) SUBTOTAL of Unitemized Independent Expenditures  | ······ <b>&gt;</b>   |
| (c) TOTAL Independent Expenditures   | ······································                       |
| Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or age party committee) any political party committee or its agent. |  |
| King, Crystal, , ,  [Electronically Filed]   | Date 11 03 2016  |
| Signature  |  |

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OF

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

| Schedule E)   | INT EXI END        | HONES                 |                          | PAGE 12 OF 16<br>FOR SE OF FORM 24/48              |
|---|--------------------|-----------------------|--------------------------|--|
| NAME OF COMMITTEE (In Full)   |                    |                       | 1                        | FEC IDENTIFICATION NUMBER ▼                        |
| Working America Coalition   |                    |                       |                          | C C00620583  |
| Check if 24-hour report 48-hour report  | X New rep          | port Amends repo      |                          | M / D D / Y D Y D Y                                |
| Full Name of Payee  |                    |                       | Date of                  | f Public Distribution/Dissemination                |
| Mosaic  |                    |                       |                          | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y        |
| Mailing Address 4801 Viewpoint Place  |                    |                       | Amoun                    | t  |
| City  | State              | Zip Code              |                          | 240.00   |
| Cheverly  | MD                 | 20781                 |                          | ction ID : D616105<br>f Disbursement or Obligation |
| Purpose of Expenditure<br>Fliers  |                    | Category/<br>Type 004 |                          | 11 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y          |
| Name of Federal Candidate   |                    | <b>x</b> Support      | Office Sought:           | House District:                                    |
| MCGINTY, KATHLEEN, ALANA, ,   |                    | Oppose                | Preside                  | nt Senate State: PA                                |
| Calendar Year-To-Date Per Election for Office Sought  | T T                | 23422.20              | Disbursement<br>2016 Ott | For: Primary <b>x</b> General ther (specify) ▶     |
| Full Name of Payee  |                    |                       | Date o                   | f Public Distribution/Dissemination                |
| Mosaic  |                    |                       |                          | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y        |
| Mailing Address 4801 Viewpoint Place  |                    |                       | Amoun                    | t  |
| City  | State              | Zip Code              |                          | 180.00   |
| Cheverly  | MD                 | 20781                 |                          | ction ID : D616106<br>f Disbursement or Obligation |
| Purpose of Expenditure<br>Fliers  |                    | Category/<br>Type 004 |                          | 11 02 7 2016                                       |
| Name of Federal Candidate   |                    | <b>x</b> Support      | Office Sought            | : House District:                                  |
| Rodham Clinton, Hillary, , ,  |                    | Oppose                | <b>x</b> Preside         |  |
| Calendar Year-To-Date Per Election for Office Sought  | , ,                | 349186.38             | Disbursement<br>2016 Ot  | For: Primary   General  her (specify)              |
| (a) SUBTOTAL of Itemized Independent Expendit   | ures               |                       |                          | 420.00   |
| (b) OUDTOTAL of Heiberiand Independent France   | el'h una a         |                       |                          | 7  |
| (b) SUBTOTAL of Unitemized Independent Expen  | altures            |                       | · ·                      | . 4 4 4  |
| (c) TOTAL Independent Expenditures  |                    |                       | •                        | 7 7 7  |
| Under penalty of perjury I certify that the indepen<br>with, or at the request or suggestion of, any candi<br>party committee) any political party committee or i | date or authorized |                       |                          |  |
| King, Crystal, , ,  | [Electron          | nically Filed] Date   | 11                       | 03 / 2016  |
| Olynatul <del>C</del>   |                    |                       |                          |  |

| ,   | FOR SE OF FORM 24/48  |  |  |  |  |  |
|---|---|--|--|--|--|--|
| NAME OF COMMITTEE (In Full)   | FEC IDENTIFICATION NUMBER ▼                                 |  |  |  |  |  |
| Working America Coalition   | C C00620583   |  |  |  |  |  |
| Check if X 24-hour report 48-hour report New report Amends report   | t filed on  |  |  |  |  |  |
| Full Name of Payee  | Date of Public Distribution/Dissemination                   |  |  |  |  |  |
| Mosaic  | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                 |  |  |  |  |  |
| Mailing Address 4801 Viewpoint Place  | Amount  |  |  |  |  |  |
| City State Zip Code   | 200.00  |  |  |  |  |  |
| Cheverly MD 20781   | Transaction ID : D616107 Date of Disbursement or Obligation |  |  |  |  |  |
| Purpose of Expenditure Fliers  Category/ Type 004   | 11 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                   |  |  |  |  |  |
| Name of Federal Candidate Support   | Office Sought: House District:                              |  |  |  |  |  |
| MCGINTY, KATHLEEN, ALANA, , Oppose  | President Senate State: PA                                  |  |  |  |  |  |
| Odichadi Ical Io Dalc   | Disbursement For: Primary   ✓ General  Other (specify)   ✓  |  |  |  |  |  |
| Full Name of Payee  Mosaic  | Date of Public Distribution/Dissemination                   |  |  |  |  |  |
| Mailing Address 4801 Viewpoint Place  | 11 02 2016<br>Amount  |  |  |  |  |  |
| City.   | 20.00   |  |  |  |  |  |
| City State Zip Code Cheverly MD 20781   | 30.00 Transaction ID : D616108                              |  |  |  |  |  |
| Purpose of Expenditure Fliers  Category/ Type  004  | Date of Disbursement or Obligation  M 1                     |  |  |  |  |  |
| Name of Federal Candidate Support   | Office Sought: House District:                              |  |  |  |  |  |
| FEINGOLD, RUSSELL, DANA, ,  | President Senate State: WI                                  |  |  |  |  |  |
|   | Disbursement For:   |  |  |  |  |  |
| (a) SUBTOTAL of Itemized Independent Expenditures   | 230.00  |  |  |  |  |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures   | <b>•</b>  |  |  |  |  |  |
| (c) TOTAL Independent Expenditures  | ·   |  |  |  |  |  |
| 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. |   |  |  |  |  |  |
| King, Crystal, , ,  [Electronically Filed] Date   | 11 03 2016  |  |  |  |  |  |
| Signature   |   |  |  |  |  |  |

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|  |  | FOR SE OF FORM 24/48  |  |  |  |  |
|--|--|---|--|--|--|--|
| NAME OF COMMITTEE (In Full)  |  | FEC IDENTIFICATION NUMBER ▼                                 |  |  |  |  |
| Working America Coalition  |  | C C00620583   |  |  |  |  |
| Check if 24-hour report 48-hour report New report  | Amends report filed on                 | M / D D / Y D Y D Y   |  |  |  |  |
| Full Name of Payee   | Date of                                | of Public Distribution/Dissemination                        |  |  |  |  |
| Mosaic   | М                                      | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                 |  |  |  |  |
| Mailing Address 4801 Viewpoint Place   | Amou                                   |   |  |  |  |  |
| City State Zip C   | Code                                   | 60.00   |  |  |  |  |
| Cheverly MD 2078   | 31 Trans                               | Transaction ID : D616109 Date of Disbursement or Obligation |  |  |  |  |
| Purpose of Expenditure Fliers Cat  |  | 11 02 2016  |  |  |  |  |
| Name of Federal Candidate  | Support Office Sough                   | t: House District:  |  |  |  |  |
| FEINGOLD, RUSSELL, DANA, ,   | Oppose Preside                         | ent 🗶 Senate State: WI                                      |  |  |  |  |
| Calendar Year-To-Date Per Election for Office Sought 20  | Disbursement 2016 O                    | t For: Primary <b>x</b> General ther (specify) ▶            |  |  |  |  |
| Full Name of Payee Mosaic  | Date of                                |   |  |  |  |  |
| Mailing Address 4801 Viewpoint Place   | Amou                                   | 11 02 2016<br>nt  |  |  |  |  |
| City State Zip (   | Code                                   | 180.00  |  |  |  |  |
| Cheverly MD 2075   | 81 Transa                              | ction ID : D616110<br>of Disbursement or Obligation         |  |  |  |  |
| Purpose of Expenditure Fliers  Cat   |  | 11 02 2016  |  |  |  |  |
| Name of Federal Candidate  | X Support Office Sough                 | t: House District:  |  |  |  |  |
| MCGINTY, KATHLEEN, ALANA, ,  | Oppose Preside                         | ent Senate State: PA  |  |  |  |  |
| Calendar Year-To-Date Per Election for Office Sought 23  | 1422.20 Disbursemen 2016 O             | t For: Primary <b>X</b> General ther (specify) ▶            |  |  |  |  |
| (a) SUBTOTAL of Itemized Independent Expenditures  | ······                                 | 240.00  |  |  |  |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures  | ······································ | 7 7 7   |  |  |  |  |
| (c) TOTAL Independent Expenditures   | · .                                    | 7 1 7 1 7   |  |  |  |  |
| 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.  |  |   |  |  |  |  |
| King, Crystal, , ,  [Electronically Association of the companion of the co | Filed] Date 11                         | 03 / 2016   |  |  |  |  |
| Signature  |  |   |  |  |  |  |

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|   | Siledule Ly   | FOR SE OF FORM 24/48   |  |  |  |  |
|---|---|--|--|--|--|--|
|   | ME OF COMMITTEE (In Full)   | FEC IDENTIFICATION NUMBER ▼                                  |  |  |  |  |
| ٧   | Vorking America Coalition   | C C00620583  |  |  |  |  |
| Ch  | neck if X 24-hour report 48-hour report New report Amends report filed              | on Man / Dad / Yayayay                                       |  |  |  |  |
|   | Full Name of Payee  | Date of Public Distribution/Dissemination                    |  |  |  |  |
|   | Mosaic  | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                  |  |  |  |  |
|   | Mailing Address 4801 Viewpoint Place  | Amount   |  |  |  |  |
|   | City State Zip Code   | 720.00   |  |  |  |  |
|   | Cheverly MD 20781   | Transaction ID : D616111 Date of Disbursement or Obligation  |  |  |  |  |
|   | Purpose of Expenditure Fliers  Category/ Type  004                                  | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                  |  |  |  |  |
|   | Name of Federal Candidate Support Office  | e Sought: X House District: 04                               |  |  |  |  |
|   | KIHUEN, RUBEN, , ,  | President Senate State: NV                                   |  |  |  |  |
|   | Calendar Year-To-Date Per Election for Office Sought  Disbut 22244.40  Disbut 22016 | ursement For: Primary 🗶 General                              |  |  |  |  |
|   | Per Election for Office Sought  | Other (specify)  |  |  |  |  |
|   | Full Name of Payee  Mosaic  | Date of Public Distribution/Dissemination                    |  |  |  |  |
|   | Mailing Address 4801 Viewpoint Place  | 11 02 2016<br>Amount   |  |  |  |  |
|   | City State Zip Code   | 720.00   |  |  |  |  |
|   | Cheverly MD 20781   | Transaction ID : D616112  Date of Disbursement or Obligation |  |  |  |  |
|   | Purpose of Expenditure Fliers  Category/ Type  004                                  | 11 02 / Y Y Y Y Y Y  |  |  |  |  |
|   | Name of Federal Candidate Support Office  | e Sought:  |  |  |  |  |
|   |   | President Senate State: NV                                   |  |  |  |  |
|   | Calendar Year-To-Date Per Election for Office Sought  Disb 2016                     | ursement For: Primary <b>X</b> General  Other (specify) ▶    |  |  |  |  |
|   | (a) SUBTOTAL of Itemized Independent Expenditures                                   | 1440.00  |  |  |  |  |
|   | (b) SUBTOTAL of Unitemized Independent Expenditures                                 |  |  |  |  |  |
|   | (c) TOTAL Independent Expenditures  |  |  |  |  |  |
| 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. |   |  |  |  |  |  |
|   |   | M / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                    |  |  |  |  |
|   | Signature   |  |  |  |  |  |
| _   |   |  |  |  |  |  |

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#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

| Schedule E)   | IVI EXI END | THORIES               |                                | PAGE 16 OF 16<br>FOR SE OF FORM 24/48     |  |  |  |
|---|-------------|-----------------------|--------------------------------|---|--|--|--|
| NAME OF COMMITTEE (In Full)   |             |                       | FEC                            | IDENTIFICATION NUMBER ▼                   |  |  |  |
| Working America Coalition   |             |                       | C                              | C00620583                                 |  |  |  |
| Check if X 24-hour report 48-hour report New report Amends report filed on  |             |                       |                                |   |  |  |  |
| Full Name of Payee  |             |                       | Date of Pul                    | blic Distribution/Dissemination           |  |  |  |
| Mosaic  |             |                       | 11                             | 02 / 2016                                 |  |  |  |
| Mailing Address 4801 Viewpoint Place  |             |                       | Amount                         |   |  |  |  |
| City  | State       | Zip Code              |                                | 148.50                                    |  |  |  |
| Cheverly  | MD          | 20781                 |                                | n ID: D616113<br>sbursement or Obligation |  |  |  |
| Purpose of Expenditure<br>Fliers  |             | Category/<br>Type 004 | 11                             | 02 / 2016                                 |  |  |  |
| Name of Federal Candidate   |             | <b>x</b> Support      | Office Sought:                 | House District:                           |  |  |  |
| MCGINTY, KATHLEEN, ALANA, ,   |             | Oppose                | President                      | Senate State: PA                          |  |  |  |
| Calendar Year-To-Date Per Election for Office Sought  | 7           | 23422.20              | Disbursement For: 2016 Other ( | : Primary ✗ General                       |  |  |  |
| Full Name of Payee  |             |                       | Date of Pu                     | blic Distribution/Dissemination           |  |  |  |
| Mosaic  |             |                       | 11                             | 02 / 2016                                 |  |  |  |
| Mailing Address 4801 Viewpoint Place  |             |                       | Amount                         |   |  |  |  |
| City  | State       | Zip Code              |                                | 153.00                                    |  |  |  |
| Cheverly  | MD          | 20781                 |                                | D: D616114<br>sbursement or Obligation    |  |  |  |
| Purpose of Expenditure<br>Fliers  |             | Category/<br>Type 004 | 11 M                           | 02 / 2016                                 |  |  |  |
| Name of Federal Candidate   |             | <b>✗</b> Support      | Office Sought:                 | House District:                           |  |  |  |
| Rodham Clinton, Hillary, , ,  |             | Oppose                | <b>✗</b> President             | Senate State:                             |  |  |  |
| Calendar Year-To-Date Per Election for Office Sought  | 7           | 349186.38             | Disbursement For 2016 Other    | : Primary ✗ General                       |  |  |  |
| (a) SUBTOTAL of Itemized Independent Expenditu  | ıres        |                       |                                | 301.50                                    |  |  |  |
|   |             |                       |                                | 7 33.100                                  |  |  |  |
| (b) SUBTOTAL of Unitemized Independent Expen  | ditures     |                       | · <b>•</b>                     | 7   |  |  |  |
| (c) TOTAL Independent Expenditures  |             |                       | · •                            | 6335.50                                   |  |  |  |
| 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. |             |                       |                                |   |  |  |  |
| King, Crystal, , ,  | [Electron   | nically Filed] Date   | 11 03                          |   |  |  |  |
| Olynature   |             |                       |                                |   |  |  |  |