

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Working America Coalition

ADDRESS (number and street) 815 16th Street, NW Washington DC 20006 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00620583 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 Year-End Report (YE) x, July 31 Mid-Year Report (Non-election Year Only) (MY), Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) Election on M M M / D D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S) Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 11 / 29 / 2016 through 12 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. King, Crystal, , ,

Type or Print Name of Treasurer

Signature of Treasurer King, Crystal, , , [Electronically Filed] Date 07 / 20 / 2017

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**Working America Coalition**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="210525.25"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="310469.57"/>	<input type="text" value="16478011.12"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="520994.82"/>	<input type="text" value="16478011.12"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="369514.03"/>	<input type="text" value="16326530.33"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="151480.79"/>	<input type="text" value="151480.79"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="45.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

Working America Coalition

Report Covering the Period: From: 11 / 29 / 2016 To: 12 / 31 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	269647.94	12829815.53
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	269647.94	12829815.53
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	40768.80	3647944.37
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	310416.74	16477759.90
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	52.83	251.22
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	310469.57	16478011.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	310469.57	16478011.12

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	328230.62	14960067.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	328230.62	14960067.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	92250.00
24. Independent Expenditures (use Schedule E) .....	26470.00	934417.99
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	14813.41	339794.69
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	369514.03	16326530.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	369514.03	16326530.33

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	310416.74	16477759.90
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	310416.74	16477759.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	328230.62	14960067.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	328230.62	14960067.65

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 80
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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 COMMITTEE (In Full)  
**Working America Coalition**

**A. AFL-CIO COPE Treasury**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 815 16th St NW

City Washington	State DC	Zip Code 20006-4101
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5570322.57

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2016

**Transaction ID : VTEAMBXYEG8**

Amount of Each Receipt this Period  
104275.00

Memo Item

\* In-Kind: Travel Expenses

**B. AFL-CIO COPE Treasury**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 815 16th St NW

City Washington	State DC	Zip Code 20006-4101
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5570322.57

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2016

**Transaction ID : VTEAMBXYD16**

Amount of Each Receipt this Period  
165372.94

Memo Item

\* In-Kind: Travel Expenses

**C.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	269647.94
<b>TOTAL</b> This Period (last page this line number only).....	269647.94

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
COMMITTEE FOR WORKING FAMILIES SPONSORED BY THE CALIFORNIA LABOR FEDERATION AFL-CIO

Mailing Address 555 Capitol Mall  
Ste 1425

City Sacramento State CA Zip Code 95814-4602

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
92966.89

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 08 / 2016

Transaction ID : **VTEAMBYJF02**

Amount of Each Receipt this Period  
40768.80

Memo Item

\* In-Kind: In-kind Lodging and Travel expenses for canvassing

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	40768.80
<b>TOTAL</b> This Period (last page this line number only).....	40768.80

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

**A. Amalgamated Bank of Chicago**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 N La Salle St

City Chicago	State IL	Zip Code 60602-2590
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.22

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

**Transaction ID : VTEAMBXYEN7**

Amount of Each Receipt this Period  
39.85

Memo Item

Interest

**B. Amalgamated Bank of Chicago**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 N La Salle St

City Chicago	State IL	Zip Code 60602-2590
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.22

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

**Transaction ID : VTEAMBXYGZ0**

Amount of Each Receipt this Period  
12.98

Memo Item

Interest

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	52.83
<b>TOTAL</b> This Period (last page this line number only).....	52.83





**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Working America Coalition**

Full Name (Last, First, Middle Initial)

**A. Amalgamated Bank of Chicago**

Mailing Address 30 N La Salle St

City  
Chicago

State  
IL

Zip Code  
60602-2590

Purpose of Disbursement  
Bank Fees

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VTDBC9S9A)

Amount of Each Disbursement this Period

22.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Amalgamated Bank of Chicago**

Mailing Address 30 N La Salle St

City  
Chicago

State  
IL

Zip Code  
60602-2590

Purpose of Disbursement  
Bank Fees

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VTDBC9S9AJ

Amount of Each Disbursement this Period

32.04
-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. COMMITTEE FOR WORKING FAMILIES SPONSORED BY THE CALIFORNIA LABOR FEDERATION AFL-CIO**

Mailing Address 555 Capitol Mall  
Ste 1425

City  
Sacramento

State  
CA

Zip Code  
95814-4602

Purpose of Disbursement  
In-kind Lodging and Travel expenses for canvassing

[REDACTED]

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VTEAMBYJF

Amount of Each Disbursement this Period

40768.80
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\* In-Kind Received

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

40822.84
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

Full Name (Last, First, Middle Initial) <b>A. Evans &amp; Katz, LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 22 / 2016	
Mailing Address PO Box 75357		FEC Identification Number C [REDACTED] <b>Transaction ID : VTDBC9SBEI</b> Amount of Each Disbursement this Period 2641.95	
City Washington	State DC	Zip Code 20013-0357	Category/ Type 001
Purpose of Disbursement Compliance Services			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Lexicon</b>		Date of Disbursement MM / DD / YYYY 12 / 22 / 2016	
Mailing Address 10300 Farnham Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VTDBC9S9AC</b> Amount of Each Disbursement this Period 1897.50	
City Bethesda	State MD	Zip Code 20814-2218	Category/ Type 004
Purpose of Disbursement Design Services			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Lexicon</b>		Date of Disbursement MM / DD / YYYY 12 / 22 / 2016	
Mailing Address 10300 Farnham Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VTDBC9S9B</b> Amount of Each Disbursement this Period 412.50	
City Bethesda	State MD	Zip Code 20814-2218	Category/ Type 004
Purpose of Disbursement Design Services			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4951.95
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

Full Name (Last, First, Middle Initial)

**A. Lexicon**

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement  
Design Services

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

**C**  
**Transaction ID : VTDBC9S9B1**  
Amount of Each Disbursement this Period  
82.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. Lexicon**

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement  
Design Services

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

**C**  
**Transaction ID : VTDBC9S9C9**  
Amount of Each Disbursement this Period  
412.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. Lexicon**

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement  
Design Services

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

**C**  
**Transaction ID : VTDBC9S9C**  
Amount of Each Disbursement this Period  
495.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

990.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

Full Name (Last, First, Middle Initial)

**A. Lexicon**

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement  
Design Services

004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

C  
**Transaction ID : VTDBC9S9C1**  
Amount of Each Disbursement this Period  
412.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. Lexicon**

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement  
Design Services

004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

C  
**Transaction ID : VTDBC9S9C2**  
Amount of Each Disbursement this Period  
165.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Lexicon**

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement  
Design Services

004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

C  
**Transaction ID : VTDBC9S9E:**  
Amount of Each Disbursement this Period  
165.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

742.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

Full Name (Last, First, Middle Initial)

**A. Lexicon**

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement  
Design Services

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

**C**  
**Transaction ID : VTDBC9S9Ez**  
Amount of Each Disbursement this Period  
742.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mosaic**

Mailing Address 4801 Viewpoint Pl

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Shipping

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

**C**  
**Transaction ID : VTDBC9SBQ:**  
Amount of Each Disbursement this Period  
4882.89

Memo Item

Full Name (Last, First, Middle Initial)

**C. NALC 1091 Inc.**

Mailing Address 4790 Deauville Dr  
Ste 100

City Orlando State FL Zip Code 32808-7753

Purpose of Disbursement  
Voided Check from 9/14/2016

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

**C**  
**Transaction ID : VTDBC9SAS**  
Amount of Each Disbursement this Period  
- 800.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4825.39

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

Full Name (Last, First, Middle Initial)  
**A. NGP VAN, INC.**

Date of Disbursement:  /  /

Mailing Address: 1225 I St NW  
Ste 1225

City: Washington State: DC Zip Code: 20005-5918

Purpose of Disbursement: Software and Support  
Candidate Name:  Category/Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:  Memo Item

FEC Identification Number:   
Transaction ID : VTDBC9S8JH  
Amount of Each Disbursement this Period:

Full Name (Last, First, Middle Initial)  
**B. PoliOps, LLC**

Date of Disbursement:  /  /

Mailing Address: 210 Rocketts Way  
Unit 411

City: Richmond State: VA Zip Code: 23231-3061

Purpose of Disbursement: Software & Support  
Candidate Name:  Category/Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:  Memo Item

FEC Identification Number:   
Transaction ID : VTDBC9SET1  
Amount of Each Disbursement this Period:

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

Date of Disbursement:  /  /

Mailing Address:

City:  State:  Zip Code:

Purpose of Disbursement:  Candidate Name:  Category/Type:

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:  Memo Item

FEC Identification Number:   
Amount of Each Disbursement this Period:

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

**A. Lexicon**

Full Name (Last, First, Middle Initial)

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement Non Federal Fliers

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 16 / 2016

FEC Identification Number: C

Transaction ID : VTDBC9S9A7

Amount of Each Disbursement this Period: 330.00

Memo Item

**B. Lexicon**

Full Name (Last, First, Middle Initial)

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement Design Non Fed Flier

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2016

FEC Identification Number: C

Transaction ID : VTDBC9S9AF

Amount of Each Disbursement this Period: 247.50

Memo Item

**C. Lexicon**

Full Name (Last, First, Middle Initial)

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement Design Non Fed Flier

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2016

FEC Identification Number: C

Transaction ID : VTDBC9S9B

Amount of Each Disbursement this Period: 82.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 660.00

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

Full Name (Last, First, Middle Initial)

**A. Lexicon**

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement  
Design Non Fed Flier

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

**C**  
**Transaction ID : VTDBC9S9Bf**  
Amount of Each Disbursement this Period  
82.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. Lexicon**

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement  
Design Non Fed Flier

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

**C**  
**Transaction ID : VTDBC9S9BF**  
Amount of Each Disbursement this Period  
825.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Lexicon**

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement  
Design Non Fed Flier

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

**C**  
**Transaction ID : VTDBC9S9B**  
Amount of Each Disbursement this Period  
165.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1072.50

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

**A. Lexicon**

Full Name (Last, First, Middle Initial)

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement Design Non Fed Flier

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2016

FEC Identification Number: C

Transaction ID : VTDBC9S9C

Amount of Each Disbursement this Period: 1567.50

Memo Item

**B. Lexicon**

Full Name (Last, First, Middle Initial)

Mailing Address 10300 Farnham Dr

City Bethesda State MD Zip Code 20814-2218

Purpose of Disbursement Design Non Fed Flier

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2016

FEC Identification Number: C

Transaction ID : VTDBC9S9CI

Amount of Each Disbursement this Period: 825.00

Memo Item

**C. Mosaic**

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement Non Federal Fliers

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2016

FEC Identification Number: C

Transaction ID : VTDBC9SBP

Amount of Each Disbursement this Period: 450.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2842.50

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

Full Name (Last, First, Middle Initial)

**A. Mosaic**

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Non Federal Fliers

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 22 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : VTDBC9SBQ  
Amount of Each Disbursement this Period

[REDACTED] 2405.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mosaic**

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Non Federal Fliers

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 22 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : VTDBC9SBQI  
Amount of Each Disbursement this Period

[REDACTED] 60.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Mosaic**

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Non Federal Fliers

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

004  
Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 22 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : VTDBC9SET  
Amount of Each Disbursement this Period

[REDACTED] 180.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 2645.00

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

**A. Mosaic**

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement Non Federal Fliers  004 Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2016

FEC Identification Number: C  
Transaction ID : VTDBC9SEW  
Amount of Each Disbursement this Period: 30.00

Memo Item

**B. Mosaic**

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement Non Federal Fliers  004 Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2016

FEC Identification Number: C  
Transaction ID : VTDBC9SEY  
Amount of Each Disbursement this Period: 60.00

Memo Item

**C. Mosaic**

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement Non Federal Fliers  004 Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2016

FEC Identification Number: C  
Transaction ID : VTDBC9SEY  
Amount of Each Disbursement this Period: 30.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 120.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

Full Name (Last, First, Middle Initial)

**A. Mosaic**

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Non Federal Fliers

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

C  
Transaction ID : VTDBC9SEY1  
Amount of Each Disbursement this Period  
420.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mosaic**

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Non Federal Fliers

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

C  
Transaction ID : VTDBC9SEZ1  
Amount of Each Disbursement this Period  
270.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Mosaic**

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Non Federal Fliers

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number

C  
Transaction ID : VTDBC9SF21  
Amount of Each Disbursement this Period  
30.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

720.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

Full Name (Last, First, Middle Initial)

**A. Mosaic**

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Non Federal Fliers

004
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	22	/	2016

FEC Identification Number

C [REDACTED]

**Transaction ID : VTDBC9SF4**

Amount of Each Disbursement this Period

[REDACTED] 210.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mosaic**

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Non Federal Fliers

004
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	22	/	2016

FEC Identification Number

C [REDACTED]

**Transaction ID : VTDBC9SF5C**

Amount of Each Disbursement this Period

[REDACTED] 45.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Mosaic**

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Non Federal Fliers

004
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	22	/	2016

FEC Identification Number

C [REDACTED]

**Transaction ID : VTDBC9SF7I**

Amount of Each Disbursement this Period

[REDACTED] 90.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]	345.00
[REDACTED]	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Working America Coalition**

**A. Mosaic**

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement Non Federal Fliers

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2016

FEC Identification Number: C

Transaction ID : VTDBC9SF7I

Amount of Each Disbursement this Period: 90.00

Memo Item

**B. Mosaic**

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement Non Federal Fliers

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2016

FEC Identification Number: C

Transaction ID : VTDBC9SGHI

Amount of Each Disbursement this Period: 90.00

Memo Item

**C. Mosaic**

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement Non Federal Fliers

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2016

FEC Identification Number: C

Transaction ID : VTDBC9SGK

Amount of Each Disbursement this Period: 60.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 240.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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 COMMITTEE (In Full)  
**Working America Coalition**

Full Name (Last, First, Middle Initial)

**A. Mosaic**

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Non Federal Fliers

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number  
C  
Transaction ID : VTDBC9SGM  
Amount of Each Disbursement this Period  
120.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mosaic**

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Non Federal Shipping

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number  
C  
Transaction ID : VTDBC9SGR  
Amount of Each Disbursement this Period  
1553.41

Memo Item

Full Name (Last, First, Middle Initial)

**C. Mosaic**

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Non Federal Fliers

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number  
C  
Transaction ID : VTDBC9SGS  
Amount of Each Disbursement this Period  
60.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1733.41



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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 COMMITTEE (In Full)  
**Working America Coalition**

Full Name (Last, First, Middle Initial)

**A. Mosaic**

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Non Federal Fliers

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number  
C  
Transaction ID : VTDBC9SGS  
Amount of Each Disbursement this Period  
15.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mosaic**

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement  
Non Federal Fliers

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

FEC Identification Number  
C  
Transaction ID : VTDBC9SGT  
Amount of Each Disbursement this Period  
420.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. New Hampshire AFL-CIO**

Mailing Address 161 Londonderry Trunpike

City Hooksett State NH Zip Code 03106

Purpose of Disbursement  
Non-Federal Canvassing

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2016

FEC Identification Number  
C  
Transaction ID : VTDBC9SBQ  
Amount of Each Disbursement this Period  
4000.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4435.00
<b>TOTAL</b> This Period (last page this line number only).....▶	14813.41

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 26 OF 80
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Working America Coalition**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AFL-CIO</b>			Nature of Debt (Purpose): Nonfederal Fliers
Mailing Address 815 16th St NW			
City Washington	State DC	Zip Code 20006-4101	

Outstanding Balance Beginning This Period 45.00	Transaction ID : VTBCW9H8675	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 45.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mosaic</b>			Nature of Debt (Purpose): Fliers
Mailing Address 4801 Viewpoint Pl			
City Hyattsville	State MD	Zip Code 20781-1100	

Outstanding Balance Beginning This Period 26470.00	Transaction ID : VTBCW9H86A9	
Amount Incurred This Period 0.00	Payment This Period 26470.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period	Transaction ID :	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	45.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	45.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	45.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 120.00
Transaction ID : VTDBC9SBNZ7
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, ,
Support Oppose
Office Sought: House District:
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 22510.48
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 15.00
Transaction ID : VTDBC9SBP96
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, ,
Support Oppose
Office Sought: House District:
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 22510.48
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 135.00
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/06/2016
Amount 7.50
Transaction ID : VTDBC9SBPR4
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/04/2016
Amount 450.00
Transaction ID : VTDBC9SBQ08
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 457.50
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004

Date of Public Distribution/Dissemination 11/03/2016
Amount 60.00
Transaction ID : VTDBC9SBQQ7
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, ,
Support Oppose
Office Sought: House Senate State: WI

Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004

Date of Public Distribution/Dissemination 11/03/2016
Amount 30.00
Transaction ID : VTDBC9SBQR5
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham, ,
Support Oppose
Office Sought: President Senate State:

Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 90.00
(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.

King, Crystal, , [Electronically Filed] Date 07/20/2017
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment -Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 60.00
Transaction ID : VTDBC9SBQW7
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham, , Support
Office Sought: President
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 384639.62

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 30.00
Transaction ID : VTDBC9SBQZ0
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, , Support
Office Sought: Senate
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 22510.48

(a) SUBTOTAL of Itemized Independent Expenditures 90.00
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 140.00
Transaction ID : VTDBC9SBR66
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: SHEA-PORTER, CAROL, ,
Support Oppose
Office Sought: House Senate State: NH
District: 01
Calendar Year-To-Date Per Election for Office Sought 1235.00
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 30.00
Transaction ID : VTDBC9SBRD1
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, ,
Support Oppose
Office Sought: House Senate State: WI
District:
Calendar Year-To-Date Per Election for Office Sought 22510.48
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 170.00
(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.

King, Crystal, , [Electronically Filed] Date 07/20/2017
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment -Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 120.00
Transaction ID : VTDBC9SBRK8
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MCGINTY, KATHLEEN ALANA, ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 28524.30
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 225.00
Transaction ID : VTDBC9SBRN4
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham, ,
Support Oppose
Office Sought: House District:
President Senate State:
Calendar Year-To-Date Per Election for Office Sought 384639.62
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 345.00
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 1440.00
Transaction ID: VTDBC9SBSP5
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: KIHUEN, RUBEN, , ,
Support Oppose
Office Sought: House District: 04
President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 19484.35
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 60.00
Transaction ID: VTDBC9SBTF2
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: NELSON, TOM, , ,
Support Oppose
Office Sought: House District: 08
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 3790.50
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1500.00
(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.

King, Crystal, , ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/05/2016
Amount 450.00
Transaction ID : VTDBC9SBV95
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House District:
President Senate State:
Calendar Year-To-Date Per Election for Office Sought 384639.62
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/06/2016
Amount 24.00
Transaction ID : VTDBC9SBVC9
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MURPHY, PATRICK,
Support Oppose
Office Sought: House District:
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 108649.59
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 474.00
(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.

King, Crystal, ,

[Electronically Filed]

Date

07 / 20 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/04/2016
Amount 90.00
Transaction ID : VTDBC9SBVP8
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 200.00
Transaction ID : VTDBC9SBW56
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Santarsiero, Steven, J.,
Support Oppose
Office Sought: House Senate State: PA
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 290.00
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 1500.00
Transaction ID : VTDBC9SBW64
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: TRUMP, DONALD, J.,
Support Oppose
Office Sought: President
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought 384639.62

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment -Fliers
Date of Public Distribution/Dissemination 11/02/2016
Amount 30.00
Transaction ID : VTDBC9SBWT2
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MCGINTY, KATHLEEN ALANA,
Support Oppose
Office Sought: Senate
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought 28524.30

(a) SUBTOTAL of Itemized Independent Expenditures 1530.00
(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.

King, Crystal, ,

[Electronically Filed]

Date

07 / 20 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/04/2016
Amount 90.00
Transaction ID : VTDBC9SBXD2
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
President
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/05/2016
Amount 30.00
Transaction ID : VTDBC9SBYE1
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
President
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 120.00
(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.

King, Crystal, ,

[Electronically Filed]

Date

07 / 20 / 2017

Signature

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

NAME OF COMMITTEE (In Full) <b>Working America Coalition</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620583</span> </div>
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Check if  24-hour report  48-hour report ▶ New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item <b>Mosaic</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">MM / DD / YYYY</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 05 / 2016</div>			
Mailing Address <b>4801 Viewpoint Pl</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">210.00</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City <b>Hyattsville</b></td> <td style="width:17%; border-bottom: 1px solid black;">State <b>MD</b></td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code <b>20781-1100</b></td> </tr> </table>		City <b>Hyattsville</b>	State <b>MD</b>	Zip Code <b>20781-1100</b>
City <b>Hyattsville</b>		State <b>MD</b>	Zip Code <b>20781-1100</b>	
Purpose of Expenditure <b>Payment - Fliers</b>				
Name of Federal Candidate: <b>MCGINTY, KATHLEEN ALANA, , ,</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: _____ State: <b>PA</b>			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">28524.30</div>			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Mosaic</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">MM / DD / YYYY</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 04 / 2016</div>			
Mailing Address <b>4801 Viewpoint Pl</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">22.50</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City <b>Hyattsville</b></td> <td style="width:17%; border-bottom: 1px solid black;">State <b>MD</b></td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code <b>20781-1100</b></td> </tr> </table>		City <b>Hyattsville</b>	State <b>MD</b>	Zip Code <b>20781-1100</b>
City <b>Hyattsville</b>		State <b>MD</b>	Zip Code <b>20781-1100</b>	
Purpose of Expenditure <b>Payment - Fliers</b>				
Name of Federal Candidate: <b>Clinton, Hillary, Rodham, ,</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> Other (specify) _____ District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">384639.62</div>			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">232.50</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </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.

*King, Crystal, , ,*

*[Electronically Filed]*

Date MM / DD / YYYY  

07 / 20 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers
Date of Public Distribution/Dissemination 11/02/2016
Amount 150.00
Transaction ID : VTDBC9SETC0
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: HARTMAN, CHRISTINA MARIE, ,
Support Oppose
Office Sought: House District: 16
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 1434.00
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers
Date of Public Distribution/Dissemination 11/04/2016
Amount 450.00
Transaction ID : VTDBC9SEV57
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham, ,
Support Oppose
Office Sought: President Senate State:
Calendar Year-To-Date Per Election for Office Sought 384639.62
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 600.00
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 225.00
Transaction ID : VTDBC9SEVK6
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MURPHY, PATRICK, ,
Support Oppose
Office Sought: House Senate State: FL
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 720.00
Transaction ID : VTDBC9SEVW7
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: KIHUEN, RUBEN, ,
Support Oppose
Office Sought: House Senate State: NV
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 945.00
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 60.00
Transaction ID : VTDBC9SEWG5
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, ,
Support Oppose
Office Sought: House Senate WI
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment -Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 60.00
Transaction ID : VTDBC9SEWJ1
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham, ,
Support Oppose
Office Sought: President Senate
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 120.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 60.00
Transaction ID : VTDBC9SEX43
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, ,
Support Oppose
Office Sought: House District:
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 22510.48
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 150.00
Transaction ID : VTDBC9SEYT7
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MCGINTY, KATHLEEN ALANA, ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 28524.30
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 210.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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King, Crystal, , [Electronically Filed] Date 07/20/2017
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/05/2016
Amount 450.00
Transaction ID : VTDBC9SEZ38
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: TRUMP, DONALD, J.,
Support Oppose
Office Sought: President
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 384639.62

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 90.00
Transaction ID : VTDBC9SEZC0
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA,
Support Oppose
Office Sought: Senate
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 22510.48

(a) SUBTOTAL of Itemized Independent Expenditures 540.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature

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

NAME OF COMMITTEE (In Full) <b>Working America Coalition</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620583
---	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Mosaic</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint PI	Amount <input type="text"/>
City Hyattsville State MD Zip Code 20781-1100	Transaction ID : VTDBC9SEZG1 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Payment - Fliers Category/Type 004	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose FEINGOLD, RUSSELL DANA, , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: WI
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 22510.48	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>Mosaic</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint PI	Amount <input type="text"/>
City Hyattsville State MD Zip Code 20781-1100	Transaction ID : VTDBC9SF049 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Payment - Fliers Category/Type 004	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Clinton, Hillary, Rodham, , , Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> House State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 384639.62	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text"/> 90.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures .....	<input type="text"/>

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  /  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment -Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 60.00
Transaction ID : VTDBC9SF065
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MCGINTY, KATHLEEN ALANA, ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 28524.30
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 1500.00
Transaction ID : VTDBC9SF073
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MCGINTY, KATHLEEN ALANA, ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 28524.30
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1560.00
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 60.00
Transaction ID : VTDBC9SF099
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 15.00
Transaction ID : VTDBC9SF0E8
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 75.00
(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.

King, Crystal, ,

[Electronically Filed]

Date

07 / 20 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type

Date of Public Distribution/Dissemination 11/02/2016
Amount 120.00
Transaction ID : VTDBC9SF0J0
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Calendar Year-To-Date Per Election for Office Sought 384639.62

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment -Fliers Category/Type 004

Date of Public Distribution/Dissemination 11/03/2016
Amount 60.00
Transaction ID : VTDBC9SF0Y5
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Calendar Year-To-Date Per Election for Office Sought 384639.62

(a) SUBTOTAL of Itemized Independent Expenditures 180.00
(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.

King, Crystal, , Signature [Electronically Filed] Date 07/20/2017

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/06/2016
Amount 15.00
Transaction ID : VTDBC9SF100
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MURPHY, PATRICK, ,
Support Oppose
Office Sought: House District:
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 108649.59
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/04/2016
Amount 450.00
Transaction ID : VTDBC9SF1N6
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham, ,
Support Oppose
Office Sought: House District:
President Senate State:
Calendar Year-To-Date Per Election for Office Sought 384639.62
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 465.00
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/05/2016
Amount 210.00
Transaction ID : VTDBC9SF1R8
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 1500.00
Transaction ID : VTDBC9SF269
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1710.00
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/04/2016
Amount 450.00
Transaction ID : VTDBC9SF2F0
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 300.00
Transaction ID : VTDBC9SF2R1
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 750.00
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature

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

NAME OF COMMITTEE (In Full) <b>Working America Coalition</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620583
---	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Mosaic</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>4801 Viewpoint PI</b>	Amount <input type="text"/>
City <b>Hyattsville</b> State <b>MD</b> Zip Code <b>20781-1100</b>	<b>Transaction ID : VTDBC9SF2W2</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure <b>Payment-Fliers</b> Category/Type <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>Clinton, Hillary, Rodham, ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	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>Mosaic</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>4801 Viewpoint PI</b>	Amount <input type="text"/>
City <b>Hyattsville</b> State <b>MD</b> Zip Code <b>20781-1100</b>	<b>Transaction ID : VTDBC9SF353</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure <b>Payment - Fliers</b> Category/Type <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>FEINGOLD, RUSSELL DANA, ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate State: <b>WI</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	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 .....	<input type="text"/>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
<b>(c) TOTAL</b> Independent Expenditures .....	<input type="text"/>

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  /  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers
Date of Public Distribution/Dissemination 11/02/2016
Amount 120.00
Transaction ID : VTDBC9SF3A3
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MCGINTY, KATHLEEN ALANA, ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 28524.30
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers
Date of Public Distribution/Dissemination 11/03/2016
Amount 140.00
Transaction ID : VTDBC9SF415
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham, ,
Support Oppose
Office Sought: President Senate State:
Calendar Year-To-Date Per Election for Office Sought 384639.62
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 260.00
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004

Date of Public Distribution/Dissemination 11/04/2016
Amount 90.00
Transaction ID : VTDBC9SF4J9
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, ,
Support Oppose
Office Sought: House President Senate WI

Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004

Date of Public Distribution/Dissemination 11/03/2016
Amount 140.00
Transaction ID : VTDBC9SF5H2
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Hassan, Margaret Wood, ,
Support Oppose
Office Sought: House President Senate NH

Disbursement For: Primary General 2016 Other (specify)

(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 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 07/20/2017
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 30.00
Transaction ID : VTDBC9SF676
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type
Date of Public Distribution/Dissemination 11/02/2016
Amount 120.00
Transaction ID : VTDBC9SF6B7
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 150.00
(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.

King, Crystal, ,

[Electronically Filed]

Date

07 / 20 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 60.00
Transaction ID : VTDBC9SF6N6
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham, , Support
Office Sought: President
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 384639.62

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment -Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 30.00
Transaction ID : VTDBC9SF6Y7
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, , Support
Office Sought: Senate
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 22510.48

(a) SUBTOTAL of Itemized Independent Expenditures 90.00
(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.

King, Crystal, , [Electronically Filed] Date 07/20/2017
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 1500.00
Transaction ID : VTDBC9SF737
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment -Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 60.00
Transaction ID : VTDBC9SF745
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1560.00
(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.

King, Crystal, ,

[Electronically Filed]

Date

07 / 20 / 2017

Signature



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

NAME OF COMMITTEE (In Full) <b>Working America Coalition</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620583
---	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Mosaic</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint PI	Amount <input type="text"/>
City Hyattsville State MD Zip Code 20781-1100	<b>Transaction ID : VTDBC9SF778</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Payment-Fliers Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: MCGINTY, KATHLEEN ALANA, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 28524.30	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>Mosaic</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint PI	Amount <input type="text"/>
City Hyattsville State MD Zip Code 20781-1100	<b>Transaction ID : VTDBC9SF7P7</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Payment-Fliers Category/Type 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: MCGINTY, KATHLEEN ALANA, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 28524.30	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 420.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

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  /  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 45.00
Transaction ID : VTDBC9SF8Q6
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: STRICKLAND, TED, , ,
Support Oppose
Office Sought: House District:
President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 42322.50
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/04/2016
Amount 360.00
Transaction ID : VTDBC9SF8S1
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MURPHY, PATRICK, , ,
Support Oppose
Office Sought: House District:
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 108649.59
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 405.00
(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.

King, Crystal, , ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/04/2016
Amount 27.00
Transaction ID : VTDBC9SF9C2
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
President
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 22.50
Transaction ID : VTDBC9SFBB7
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
President
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 49.50
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 140.00
Transaction ID : VTDBC9SFBS8
Date of Disbursement or Obligation 12/22/2016
Name of Federal Candidate: Hassan, Margaret Wood, , Support
Office Sought: House District: 00
President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 2245.00
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/06/2016
Amount 7.50
Transaction ID : VTDBC9SFE98
Date of Disbursement or Obligation 12/22/2016
Name of Federal Candidate: MURPHY, PATRICK, , Support
Office Sought: House District:
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 108649.59
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 147.50
(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.

King, Crystal, , [Electronically Filed] Date 07/20/2017
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/04/2016
Amount 45.00
Transaction ID : VTDBC9SFEZ2
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 1500.00
Transaction ID : VTDBC9SGKR5
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MCGINTY, KATHLEEN ALANA,
Support Oppose
Office Sought: House Senate State: PA
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1545.00
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 90.00
Transaction ID : VTDBC9SGKW7
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, ,
Support Oppose
Office Sought: House District:
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 22510.48
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 1500.00
Transaction ID : VTDBC9SGM73
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: TRUMP, DONALD, J., ,
Support Oppose
Office Sought: House District:
President Senate State:
Calendar Year-To-Date Per Election for Office Sought 384639.62
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1590.00
(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.

King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 60.00
Transaction ID : VTDBC9SGMC3
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, , ,
Support Oppose
Office Sought: House District:
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 22510.48
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment -Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 60.00
Transaction ID : VTDBC9SGN92
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MCGINTY, KATHLEEN ALANA, , ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 28524.30
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 120.00
(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.

King, Crystal, , ,

[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/05/2016
Amount 450.00
Transaction ID : VTDBC9SGND4
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MCGINTY, KATHLEEN ALANA, , ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 28524.30
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment -Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 60.00
Transaction ID : VTDBC9SGNR1
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, , ,
Support Oppose
Office Sought: House District:
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 22510.48
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 510.00
(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.

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Date 07/20/2017

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/04/2016
Amount 22.50
Transaction ID : VTDBC9SGNW2
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, ,
Support Oppose
Office Sought: House District:
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 22510.48
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 150.00
Transaction ID : VTDBC9SGPA3
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham, ,
Support Oppose
Office Sought: House District:
President Senate State:
Calendar Year-To-Date Per Election for Office Sought 384639.62
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 172.50
(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.

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Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 22.50
Transaction ID : VTDBC9SGPE4
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, ,
Support Oppose
Office Sought: House District:
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 22510.48
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 60.00
Transaction ID : VTDBC9SGPF2
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham, ,
Support Oppose
Office Sought: House District:
President Senate State:
Calendar Year-To-Date Per Election for Office Sought 384639.62
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 82.50
(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.

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Date 07/20/2017

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 150.00
Transaction ID : VTDBC9SGPP8
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MCGINTY, KATHLEEN ALANA, ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 28524.30
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/05/2016
Amount 450.00
Transaction ID : VTDBC9SGPQ5
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham, ,
Support Oppose
Office Sought: House District:
President Senate State:
Calendar Year-To-Date Per Election for Office Sought 384639.62
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 600.00
(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.

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Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/06/2016
Amount 24.00
Transaction ID : VTDBC9SGQD6
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 90.00
Transaction ID : VTDBC9SGQR3
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 114.00
(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.

King, Crystal, ,

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Date

07 / 20 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 1500.00
Transaction ID : VTDBC9SGQS1
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type
Date of Public Distribution/Dissemination 10/27/2016
Amount 120.00
Transaction ID : VTDBC9SGQZ8
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: HARTMAN, CHRISTINA MARIE,
Support Oppose
Office Sought: House Senate State: PA
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1620.00
(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.

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Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment -Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 30.00
Transaction ID : VTDBC9SGR06
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 30.00
Transaction ID : VTDBC9SGR14
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 60.00
(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.

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Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 1500.00
Transaction ID : VTDBC9SGS17
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/04/2016
Amount 45.00
Transaction ID : VTDBC9SGS33
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA,
Support Oppose
Office Sought: House Senate State: WI
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1545.00
(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.

King, Crystal, ,

[Electronically Filed]

Date

07 / 20 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/04/2016
Amount 360.00
Transaction ID : VTDBC9SGS82
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 120.00
Transaction ID : VTDBC9SGSD2
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 480.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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King, Crystal, ,

[Electronically Filed]

Date 07/20/2017

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 90.00
Transaction ID : VTDBC9SGSJ1
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
President
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type
Date of Public Distribution/Dissemination 11/02/2016
Amount 120.00
Transaction ID : VTDBC9SGSZ4
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
President
Disbursement For: Primary General 2016 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 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.

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Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment -Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 30.00
Transaction ID : VTDBC9SGT59
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
President
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 60.00
Transaction ID : VTDBC9SGTM8
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: Clinton, Hillary, Rodham,
Support Oppose
Office Sought: House Senate State:
President
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 90.00
(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.

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[Electronically Filed]

Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/04/2016
Amount 90.00
Transaction ID : VTDBC9SGVS0
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MURPHY, PATRICK, , ,
Support Oppose
Office Sought: House District:
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 108649.59
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment -Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 120.00
Transaction ID : VTDBC9SGWC0
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MCGINTY, KATHLEEN ALANA, , ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 28524.30
Disbursement For: Primary General 2016 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 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, , ,

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Date 07/20/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 140.00
Transaction ID : VTDBC9SGXA5
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: KUSTER, ANN MCLANE, , ,
Support Oppose
Office Sought: House District: 02
President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 1343.98
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 30.00
Transaction ID : VTDBC9SGXB3
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, , ,
Support Oppose
Office Sought: House District:
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 22510.48
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 170.00
(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.

King, Crystal, , ,

[Electronically Filed]

Date

07 / 20 / 2017

Signature

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

NAME OF COMMITTEE (In Full) <b>Working America Coalition</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620583
---	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Mosaic</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>4801 Viewpoint PI</b>	Amount <input type="text"/> 60.00 <b>Transaction ID : VTDBC9SGXH1</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>Hyattsville</b> State <b>MD</b> Zip Code <b>20781-1100</b>	
Purpose of Expenditure <b>Payment - Fliers</b> Category/Type <input type="text"/> <b>004</b>	
Name of Federal Candidate: <b>FEINGOLD, RUSSELL DANA, , ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>WI</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> <b>22510.48</b>	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>Mosaic</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>4801 Viewpoint PI</b>	Amount <input type="text"/> 30.00 <b>Transaction ID : VTDBC9SGXM4</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>Hyattsville</b> State <b>MD</b> Zip Code <b>20781-1100</b>	
Purpose of Expenditure <b>Payment - Fliers</b> Category/Type <input type="text"/> <b>004</b>	
Name of Federal Candidate: <b>FEINGOLD, RUSSELL DANA, , ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>WI</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> <b>22510.48</b>	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 .....	<input type="text"/> 90.00
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
<b>(c) TOTAL</b> Independent Expenditures .....	<input type="text"/>

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

/  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/03/2016
Amount 720.00
Transaction ID : VTDBC9SGXS4
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: KIHUEN, RUBEN, , ,
Support Oppose
Office Sought: House District: 04
President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 19484.35
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint PI
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment -Fliers Category/Type
Date of Public Distribution/Dissemination 11/02/2016
Amount 75.00
Transaction ID : VTDBC9SGYF8
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MCGINTY, KATHLEEN ALANA, , ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 28524.30
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 795.00
(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.

King, Crystal, , , [Electronically Filed] Date 07/20/2017
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment-Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/02/2016
Amount 200.00
Transaction ID : VTDBC9SGYH3
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MCGINTY, KATHLEEN ALANA, ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 28524.30
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/04/2016
Amount 27.00
Transaction ID : VTDBC9SGZ85
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MURPHY, PATRICK, ,
Support Oppose
Office Sought: House District:
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 108649.59
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 227.00
(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.

King, Crystal, ,

[Electronically Filed]

Date

07 / 20 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Pl
City Hyattsville State MD Zip Code 20781-1100
Purpose of Expenditure Payment - Fliers Category/Type 004
Date of Public Distribution/Dissemination 11/06/2016
Amount 48.00
Transaction ID : VTDBC9SH0G9
Date of Disbursement or Obligation 12/22/2016

Name of Federal Candidate: MURPHY, PATRICK, ,
Support Oppose
Office Sought: House Senate State: FL
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 48.00; (b) SUBTOTAL of Unitemized Independent Expenditures; (c) TOTAL Independent Expenditures 26470.00

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 07/20/2017

Signature