

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
NJ11th for Change, Inc.

Full Name (Last, First, Middle Initial) of Payee Nickel Artistic Services		Date of Public Distribution/Dissemination 08 / 14 / 2018	
Mailing Address 39 Route 46		Amount 533.00	
City Rockaway	State NJ	Zip Code 07866	Transaction ID : F57.000001
Purpose of Expenditure Printing of handcards	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 11
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrill, Mikie, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
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)	

Full Name (Last, First, Middle Initial) of Payee Nickel Artistic Services		Date of Public Distribution/Dissemination 08 / 17 / 2018	
Mailing Address 39 Route 46		Amount 463.10	
City Rockaway	State NJ	Zip Code 07866	Transaction ID : F57.000002
Purpose of Expenditure Printing of handcards	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 11
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrill, Mikie, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
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)	

Full Name (Last, First, Middle Initial) of Payee Nickel Artistic Services		Date of Public Distribution/Dissemination 09 / 24 / 2018	
Mailing Address 39 Route 46		Amount 799.00	
City Rockaway	State NJ	Zip Code 07866	Transaction ID : F57.000003
Purpose of Expenditure Printing of handcards	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 11
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrill, Mikie, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
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)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1795.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	