

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation CITIZENS FOR A WORKING AMERICA INC.		3. FEC Identification Number C C90012758
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 429 NORTH SAINT ASAPH STREET		
(c) City, State and ZIP Code ALEXANDRIA VA 22314		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on / /

5. COVERING PERIOD: FROM / / 08 / 04 / 2016 THROUGH / / 09 / 30 / 2016

6. TOTAL CONTRIBUTIONS..... .00
7. TOTAL INDEPENDENT EXPENDITURES 144899.18

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Riter, Joel, , ,	Riter, Joel, , ,	10/12/2016

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CITIZENS FOR A WORKING AMERICA INC.

Full Name (Last, First, Middle Initial) of Payee East Meridian Strategies		Date of Public Distribution/Dissemination 08 / 04 / 2016	
Mailing Address 219 East Taylor Run Parkway		Amount 14567.41	
City Alexandria	State VA	Zip Code 22314	Transaction ID : F57.000001
Purpose of Expenditure Direct Mail	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: McCain, John, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14567.41		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee East Meridian Strategies		Date of Public Distribution/Dissemination 08 / 04 / 2016	
Mailing Address 219 East Taylor Run Parkway		Amount 7676.08	
City Alexandria	State VA	Zip Code 22314	Transaction ID : F57.000002
Purpose of Expenditure Direct Mail	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: McCain, John, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 22243.49		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee East Meridian Strategies		Date of Public Distribution/Dissemination 08 / 05 / 2016	
Mailing Address 219 East Taylor Run Parkway		Amount 20500.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : F57.000003
Purpose of Expenditure Phone Bank	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: McCain, John, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 42743.49		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	42743.49
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CITIZENS FOR A WORKING AMERICA INC.

Full Name (Last, First, Middle Initial) of Payee Advantage Direct		Date of Public Distribution/Dissemination 08 / 06 / 2016	
Mailing Address 2300 Clarendon Blvd., Ste. 303		Amount 6198.95	
City Arlington	State VA	Zip Code 22201	Transaction ID : F57.000004
Purpose of Expenditure Phone Bank	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: McCain, John, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 48942.44		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee East Meridian Strategies		Date of Public Distribution/Dissemination 08 / 16 / 2016	
Mailing Address 219 East Taylor Run Pkwy		Amount 10048.21	
City Alexandria	State VA	Zip Code 22314	Transaction ID : F57.000005
Purpose of Expenditure Direct Mail	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: McCain, John, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 58990.65		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee East Meridian Strategies		Date of Public Distribution/Dissemination 08 / 16 / 2016	
Mailing Address 219 East Taylor Run Pkwy		Amount 47326.13	
City Alexandria	State VA	Zip Code 22314	Transaction ID : F57.000006
Purpose of Expenditure Direct Mail	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: McCain, John, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 106316.78		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	63573.29
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CITIZENS FOR A WORKING AMERICA INC.

Full Name (Last, First, Middle Initial) of Payee Advantage Direct		Date of Public Distribution/Dissemination 08 / 16 / 2016	
Mailing Address 2300 Clarendon Blvd., Ste. 303		Amount 10854.90	
City Arlington	State VA	Zip Code 22201	
Purpose of Expenditure Phone Bank		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: McCain, John, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 117171.68		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name (Last, First, Middle Initial) of Payee Advantage Direct		Date of Public Distribution/Dissemination 08 / 23 / 2016	
Mailing Address 2300 Clarendon Blvd., Ste. 303		Amount 2818.80	
City Arlington	State VA	Zip Code 22201	
Purpose of Expenditure Phone Bank		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: McCain, John, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 119990.48		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name (Last, First, Middle Initial) of Payee Advantage Direct		Date of Public Distribution/Dissemination 08 / 24 / 2016	
Mailing Address 2300 Clarendon Blvd., Ste. 303		Amount 3112.20	
City Arlington	State VA	Zip Code 22201	
Purpose of Expenditure Phone Bank		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: McCain, John, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 123102.68		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	16785.90
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....▶ (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
CITIZENS FOR A WORKING AMERICA INC.

Full Name (Last, First, Middle Initial) of Payee Advantage Direct		Date of Public Distribution/Dissemination 08 / 25 / 2016	
Mailing Address 2300 Clarendon Blvd., Ste. 303		Amount 3720.15	
City Arlington	State VA	Zip Code 22201	Transaction ID : F57.000010
Purpose of Expenditure Phone Bank	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: McCain, John, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126822.83		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Advantage Direct		Date of Public Distribution/Dissemination 08 / 26 / 2016	
Mailing Address 2300 Clarendon Blvd., Ste. 303		Amount 18076.35	
City Arlington	State VA	Zip Code 22201	Transaction ID : F57.000011
Purpose of Expenditure Phone Bank	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: McCain, John, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 144899.18		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21796.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	144899.18