

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Working America

Full Name (Last, First, Middle Initial) of Payee Margarita Wooten		Date of Public Distribution/Dissemination 08 / 12 / 2016	
Mailing Address 6147 S Carpenter St		Amount 59.35	
City Chicago	State IL	Zip Code 60621-1415	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA291P9	

Full Name (Last, First, Middle Initial) of Payee McCain, Hope, , ,		Date of Public Distribution/Dissemination 08 / 12 / 2016	
Mailing Address 1389 E 171St St		Amount 27.93	
City Cleveland	State OH	Zip Code 44110-2525	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA29208	

Full Name (Last, First, Middle Initial) of Payee McCain, Hope, , ,		Date of Public Distribution/Dissemination 08 / 12 / 2016	
Mailing Address 1389 E 171St St		Amount 27.93	
City Cleveland	State OH	Zip Code 44110-2525	
Purpose of Expenditure Salary and Benefits		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : VN7CZA29333	

(a) SUBTOTAL of Itemized Independent Expenditures.....	115.21
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	