

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Fidele, Jennifer, , ,		Date of Public Distribution/Dissemination 09 / 23 / 2016	
Mailing Address 4302 Meadowbrook Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32808-2136	Transaction ID : VN7CZA3WJ38
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		149877.17	

Full Name (Last, First, Middle Initial) of Payee Fidele, Jennifer, , ,		Date of Public Distribution/Dissemination 09 / 23 / 2016	
Mailing Address 4302 Meadowbrook Ave		Amount 34.20	
City Orlando	State FL	Zip Code 32808-2136	Transaction ID : VN7CZA3WKY5
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	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		2055523.74	

Full Name (Last, First, Middle Initial) of Payee Filippelli, Paul, , ,		Date of Public Distribution/Dissemination 09 / 23 / 2016	
Mailing Address 2448 Ravenel Dr		Amount 77.20	
City Columbus	State OH	Zip Code 43209-3307	Transaction ID : VN7CZA3Y9Y8
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	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		2055523.74	

(a) SUBTOTAL of Itemized Independent Expenditures.....	145.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	