

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Henry, Lawrence, , ,		Date of Public Distribution/Dissemination 09 / 23 / 2016	
Mailing Address 4924 Eaglesmere Dr		Amount 10.69	
City Orlando	State FL	Zip Code 32819-5620	Transaction ID : VN7CZA3WJN1
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 Henry, Lawrence, , ,		Date of Public Distribution/Dissemination 09 / 23 / 2016	
Mailing Address 4924 Eaglesmere Dr		Amount 10.69	
City Orlando	State FL	Zip Code 32819-5620	Transaction ID : VN7CZA3WVG7
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 Herbert, Terrell, , ,		Date of Public Distribution/Dissemination 09 / 23 / 2016	
Mailing Address 2440 76Th Ave		Amount 68.40	
City Philadelphia	State PA	Zip Code 19150-1808	Transaction ID : VN7CZA3WVG9
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.....	89.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	